Fill in this information to identify your case:	
United States Bankruptcy Court for the:	-
Northern District of Ohio	
	pter you are filing under:
_ Cho	hapter 11
	hapter 12 hapter 13
Control of the Contro	

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

rt 1: Identify Yourself		
V 6.11	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name		
Write the name that is on your	Susan	
	First name	First name
your driver's license or	D	
passport).	Middle name	Middle name
Bring your picture	Processing and the second seco	
identification to your meeting with the trustee.	Last name	Last name
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
have used in the last 8	First name	First name
years		2
Include your married or maiden names.	Middle name	Middle name
	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
THE RESIDENCE OF THE STATE OF T		
Only the last 4 digits of		
	xxx - xx - 6	xxx - xx
number or federal	OR	OR
	9 vv _ vv _	9 xx - xx
(ITIN)		V - M
	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	Vrite the name that is on your government-issued plcture identification (for example, your driver's license or passport). Middle name Workman Last name Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Middle name Middle name First name Last name First name Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number 9 xx - xx - 6 5 5 9 OR

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

page 1

	About Debtor 1;	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in	✓ I have not used any business names or EINs.	I have not used any business names or EINs.		
the last 8 years	Business name	Business name		
doing business as names	Business name	Business name		
	EIN	EIN		
and the first transport of the first transpor	EIN	EIN		
5. Where you live		If Debtor 2 lives at a different address:		
	383 E. 327th St.			
	Number Street	Number Street		
	Willowick OH 44095			
	City State ZIP Code Lake County	City State ZIP Code		
	County	County		
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
	Number Street	Number Street		
	P.O. Box	P.O. Box		
TITTE EARL-ANDROYCYZEET J.E. BALLANONN LEFECTE III. DALLAN AN OFFICTION LANGUE AND	City State ZIP Code	City State ZIP Code		
3. Why you are choosing this district to file for	Check one:	Check one:		
bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
	I have another reason. Explain.	☐ I have another reason. Explain.		
	(See 28 U.S.C. § 1408.)	(See 28 U.S.C. § 1408.)		
TOTAL COLUMN A PART OF A P				

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

Part	2:
------	----

Tell the Court About Your Bankruptcy Case

						
7	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.				
	are choosing to file under	Chapter 7				
		Chapter 11				
		Chapter 12				
70000		Chapter 13				
8.	How you will pay the fee	yourself, you ma	y pay with cash, cashie payment on your behalf	ou may pay. Typio er's check, or mon	check with the clerk's offically, if you are paying the ey order. If your attorney ay pay with a credit card of	e fee
		I need to pay the Application for In	e fee in installments. I dividuals to Pay The Fi	f you choose this ling Fee in Installr	option, sign and attach the nents (Official Form 103 <i>i</i>	ne 4).
		less than 150% o	of the official poverty line	to, waive your fee that applies to you te this option, you	ption only if you are filing a, and may do so only if y our family size and you a must fill out the <i>Applicati</i> it with your petition.	our income is
9.	Have you filed for	☑ _{No}	NA.	770		
	bankruptcy within the last 8 years?			When	Case number	r
		District		When	Case number	· <u> </u>
		District		When	Case number	
	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business	✓ No ☐ Yes.				**************************************
	partner, or by an Debto	·			Relationship to you	
	affiliate? Distric	t	-	When	Case number, if known_	
	Debtor	-			Relationship to you	
	District			When	Case number, if known	
	Do you rent your residence?	✓ No. Go to line 12. Yes. Has your landle residence? No. Go to line 12. Has your landle residence?	ord obtained an eviction ju ne 12.	dgment against you	and do you want to stay in t Against You (Form 101A) a	your
Oi	fficial Form 101	Voluntary Po	etition for Individuals Fil	ing for Bankruptcy	,	page 3

page 3

	Are you a sole proprietor of any full- or part-time business?		o. Go to Part 4, es. Name and location of business	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as		Name of business, if any	
	a corporation, partnership, or LLC.		Number Street	
	If you have more than one sole proprietorship, use a separate sheet and attach it			
	to this petition.		City	State ZIP Code
			Check the appropriate box to describe you	ur business:
			Health Care Business (as defined in 1	1 U.S.C. § 101(27A))
			Single Asset Real Estate (as defined in	
			Stockbroker (as defined in 11 U.S.C. §	
			Commodity Broker (as defined in 11 U	.S.C. § 101(6))
			None of the above	
I G F	Chapter 11 of the Bankruptcy Code and Bare you a small business Bebtor? For a definition of small Business debtor, see	most reany of the	cent balance sheet, statement of operations these documents do not exist, follow the production of the	
	1 U.S.C. § 101(51D),	_	part of the second of the seco	a small business debtor according to the definition in
		L Yes.	I am filing under Chapter 11 and I am a sm. Bankruptcy Code.	all business debtor according to the definition in the
rt	4: Report if You Own o	r Have	Any Hazardous Property or Any Pro	perty That Needs Immediate Attention
D	o you own or have any	✓No		
p al	roperty that poses or is leged to pose a threat		What is the hazard?	
id p	fimminent and entifiable hazard to ublic health or safety? r do you own any			
O	operty that needs imediate attention?		If immediate attention is needed, why is it r	needed?
in in				
pr in Fo po the	r example, do you own rishable goods, or livestock at must be fed, or a building at needs urgent repairs?		Where is the property?	

17-14630-aih Doc 7 FILED 08/16/17 ENTERED 08/16/17 15:43:23 Page 4 of 55

Official Form 101

You must check one:

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

	 	 	_	
About Debtor 1:			_	_

✓ I received a briefing from an approved credit counseling agency within the 180 days before ! filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making

rational decisions about finances.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

page 5

Part 6: Answer These Qu	uestions for Reporting Purp	ooses			
16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. ☐ Yes. Go to line 17.				
	16b. Are your debts prin money for a business o No. Go to line 16c. Yes. Go to line 17.	narily business debts? Business del r investment or through the operation of t	bis are debts that you incurred to obtain the business or investment.		
Waldenman Copyright a secretary of the secretary copyrights	16c. State the type of debts y	you owe that are not consumer debts or I	business debts.		
17. Are you filing under Chapter 7?	☑ No. I am not filing under	Chapter 7. Go to line 18.	enthalises on the first consistence than some some some consistence and the result and advances consistence consistence are set to be the security of the secu		
Do you estimate that afte any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	administrative exper	apter 7. Do you estimate that after any ex ises are paid that funds will be available	empt property is excluded and to distribute to unsecured creditors?		
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000		
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Part 7: Sign Below					
For you		and I declare under penalty of perjury tha			
	of title 11, United States Code. under Chapter 7.	hapter 7, I am aware that I may proceed, I understand the relief available under ea	if eligible, under Chapter 7, 11,12, or 13 ach chapter, and I choose to proceed		
	The second of th	and read the notice required by 11 0.5.0			
	I request relief in accordance w	rith the chapter of title 11, United States (Code, specified in this petition.		
	understand making a false sta with a bankruptcy case can resi 18 U.S.C. §§ 152, 1341, 1519,	stement, concealing property, or obtaining ult in fines up to \$250,000, or imprisonme and 3571.	money or property by fraud in connection ent for up to 20 years, or both.		
9	Signature of Debtor 1	Mu ×	e of Debtor 2		
	Executed on 08/04/2017	Executed	d on		
(2) (2007年)	PROGENIES LA RESILA PER SELECTO CON LA SELECTION DE LA RESILA SELECTION DE LA RESILA DE LA RESILA PER SELECTION DE LA RESILA DE LA RESILA PER SELECTION DESERVARIA PER SELECTION DE LA RESILA PER SELECTION DE LA		MM / DD / YYYY		

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

page 6

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

《文学》的是一个文学,是一个文学,是一个文学,是一个文学,我们是一个文学,我们是一个文学,我们是一个文学,我们是一个文学,我们是一个文学,我们就是一个文学,我们就是一个文学,我们就是一个文学,我们就是一个文学,我们就是一个文学,我们就是一个文学,我们就是一个文学,我们就是一个文学,我们就是一个文学,我们就是一个文学,我们就是一个文学,我们就是一个文学,我们就是一个文学 I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

$\mathcal{O}V(h,i)$	26/1	,	
Sumupo	Salle Sate	08/04/2017	
Signature of Attorney for Debtor	- Jagare	MM / DD /YYYY	
Brian Flick			
Printed name			
The Dann Law Firm			
Firm name			
PO Box 6031040			
Number Street			,,
Cleveland	ОН	44103	
City	State	ZIP Code	
Contact phone 216-373-0539	Email address bflick@	dannlaw.com	
0081605	ОН		
Bar number	State	-	

Fill in this information to identify your case:							
Debtor 1	Susan D. W	orkman					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States	Bankruptcy Court fo	r the: Northern District of Oh	io				
Case number	17-14630		· .				

Check	if	this	s is	an
amend	e	d fil	ina	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$75,000.00
ia. Copy into co, total roal catalo, non achieune Arb	7
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	\$ <u>12,811.26</u>
1c. Copy line 63, Total of all property on Schedule A/B	\$87,811.26

Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A. Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ <u>122,091.00</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$ 0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	ф <u>ч.ч.</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$2,448.00
Warm As As I Hall Week	0.124.520.00
Your total liabilities	\$ <u>124,539.00</u>
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	0.000.15
Copy your combined monthly income from line 12 of Schedule I	\$ <u>2,968.46</u>
5. Schedule J: Your Expenses (Official Form 106J)	_
Copy your monthly expenses from line 22c of Schedule J	\$ <u>2,468.00</u>

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

First Name Middle Name Last Name

17-14630 Case number (# known)

Р	art 4: Answer These Questions for Administrative and Statistical Record	is	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this Yes	form to the court with your othe	r schedules.
7.	 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 		
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly if Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ncome from Official	\$2,902.47
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following:	Total claim	mana-a-a-a-a-a-a-a-a-a-a-a-a-a-a-a-a-a-a
	9a. Domestic support obligations (Copy line 6a.)	\$	
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
	9d. Student loans. (Copy line 6f.)	\$	
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00	
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00	
	9g. Total. Add lines 9a through 9f.	\$0.00	

Fill in this information to identify your case and t	nis filing:		
Debtor 1 Susan D. Workman			
Debtor 2	Last Name		
(Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of (Last Name		
Case number 17-14630	Ohio		
Out Humber			☐ Check if this is a
Official E			amended filing
Official Form 106A/B			
Schedule A/B: Propert	t y		12/15
In each category, separately list and describe iter category where you think it fits best. Be as comp responsible for supplying correct information. If r write your name and case number (if known). Ans Part 1: Describe Each Residence, Building	nore space is needed, attach a separate sheet to wer every question.	ple are filing together, be this form. On the top of	
Do you own or have any legal or equitable interest	est in any residence, building, land, or similar pro	ave an Interest In	
└─ No. Go to Part 2.	, same, or official pro	,porty:	
Yes. Where is the property?	What is the property? Check all that apply.	Do not deduct secured (laims or exemptions. Put
1.1. 383 E. 327th St. Street address, if available, or other description	Single-family home Duplex or multi-unit building	the amount of any secur	ed claims on Schedule D: ims Secured by Property:
2200 data soo, il dvallesie, oi other description	Condominium or cooperative		Current value of the
	 ✓ Manufactured or mobile home ✓ Land 	entire property? § 75,000.00	portion you own? \$ 75,000.00
Willowick OH 44095	Investment property	Describe the nature	·
City State ZIP Code	- ☐ Timeshare ☐ Other	interest (such as fee the entireties, or a li	simple, tenancy hy
	Who has an interest in the property? Check one		estate), ii kilowii.
Lake County	Debtor 1 only	_	ommunity property
County	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		
	At least one of the debtors and another		
	Other information you wish to add about this property identification number:	item, such as local	
If you own or have more than one, list here:	What is the property? Check all that apply.		
1.2.	Single-family home	Do not deduct secured cla the amount of any secure	d claims on Schedule Dr
Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative	Graditors Who Have Clair	ns Secured by Property.
	Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	Land Investment property	\$	\$
City State ZIP Code	Timeshare	Describe the nature o	f vour ownership
	Other	interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one. Debtor 1 only		
County	Debtor 2 only		
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is con (see instructions)	mmunity property
		,	
	Other information you wish to add about this ite property identification number:	m, such as local	

1 Street address, if available, or other description City State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? Describe the nature interest (such as fee the entireties, or a life	d claims on Schedule Dems Secured by Property Current value of the portion you own? \$
County	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Other information you wish to add about this it property identification number:	(see instructions)	mmunity property
2. Add the dollar value of the portion you own for a you have attached for Part 1. Write that number	II of your entries from Part 1, including any entrie here	• •	\$ 75,000.00
Part 2: Describe Your Vehicles	TO THE PART OF T	Paggarann i von namann an annama na mang an is i Abriti. Ali 45 55 45 75 fallagen propinsi ma	A + definition of the contract of the contra
Do you own, lease, or have legal or equitable interesty you own that someone else drives. If you lease a vehicles. 3. Cars, vans, trucks, tractors, sport utility vehicles. No Yes	e, also report it on Schedule G: Executory Contracts	and Unexpired Leases.	
3.1. Make: Honda Model: Civic	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	d claims on Schedule D:
Year: 2003 Approximate mileage: 181,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	
Other information: Condition: Fair	☐Check if this is community property (see instructions)	§ 3,500.00	\$ 3,500.00
If you own or have more than one, describe here:			
3.2. Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Clair	claims on Schedule D:
Year: Approximate mileage: Other information:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	Check if this is community property (see instructions)	\$	\$

page 2 of 10

. Make;		Do not deduct secured cla the amount of any secure	d claims on Schedule
Model: Year:	Debtor 2 only	Creditors Who Have Clair	
	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of portion you ow
Approximate mileage: Other information:	At least one of the debtors and another		,
Other Information.	Check if this is community property (see instructions)	\$	\$
Make:	Debtor 1 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on <i>Schedu</i> ns Secured by Prop
Year: Approximate mileage:	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property?	
Other information:	Check if this is community property (see instructions)	\$	\$
amples: Boats, trailers, motors, person No Yes	Debtor 1 only		l claims on Schedu
<i>imples:</i> Boats, trailers, motors, person No Yes Make:	nal watercraft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one.	Do not deduct secured cla fee amount of any secure	daims on Schedu is Secured by Prop Current value o
imples: Boats, trailers, motors, person No Yes Make: Model: Year:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secured <i>Creditors Who Have Clain</i> Current value of the	daims on Schedu is Secured by Prop Current value o
Imples: Boats, trailers, motors, person No Yes Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured cla the amount of any secured <i>Creditors Who Have Clain</i> Current value of the	I daims on <i>Schedu</i> is Secured by Prop Current value o portion you ow
Imples: Boats, trailers, motors, person No Yes Make: Model: Year: Other information: Du own or have more than one, list he Make:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured clarities amount of any secured Claim Current value of the entire property? \$	I daims on Schedures Secured by Propi Current value of portion you ow \$
Imples: Boats, trailers, motors, person No Yes Make: Model: Year: Other information: Fullowing or have more than one, list he Make: Model: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured cla the amount of any securer Greditors Who Have Clain Current value of the entire property? \$ Do not deduct secured cla the amount of any securec Greditors Who Have Clain	I daims on Schedulis Secured by Propiles Secured by Propiles Current value of portion you own. \$
amples: Boats, trailers, motors, person No Yes Make: Model: Year: Other information: Du own or have more than one, list he Make:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clarities amount of any secured Claim Current value of the entire property? \$	I daims on Schedulis Secured by Propiles Secured by Propiles Current value of portion you own. \$
amples: Boats, trailers, motors, person No Yes Make: Model: Year: Other information: Du own or have more than one, list he Make: Model: Year: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any securer Greditors Who Have Clain Current value of the entire property? \$	I daims on Schedu is Secured by Prop Current value of portion you ow \$

page 3 of 10

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?	Current value of the
6. Household goods and furnishings	portion you own? Do not deduct secured claim
Examples: Major appliances, furniture, linens, china, kitchenware	or exemptions.
□ No □ Yes. Describe	1 stove, 1 washer \$\\ \circ 2,000.00\$
7. Electronics	D
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanne collections: electronic devices including cell phases are the collections.	numanasiyiyoosusaasiyisteen majisteen maate
The state of the s	rs; music
□ No 2 TVs, 2 DVD players, 1 gaming console, Smart phone, laptop, PC □Yes. Describe	
	\$_1,500.00
8. Collectibles of value	**Commence of the Commence of
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Books	Annual Control of the
Yes. Describe	100.00
	\$ <u>100.00</u>
9. Equipment for sports and hobbies Examples: Sports, photographic exercises and attack to the latest and activities to the latest and activities are latest and activities a	
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis and kayaks; carpentry tools; musical instruments No	s; canoes
Yes. Describe	s 0.00
	\$_0.00
10. Firearms	Million for management of the State State of the State of
Examples: Pistols, rifles, shotguns, ammunition, and related equipment No	
Yes. Describe	\$ 0.00
11. Clothes	Procession and the second and the se
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
□ No Clothing □ Yes. Describe	
165. Describe	\$ <u>300.00</u>
12. Jeweiry	
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gold, silver	gems,
☐ No Misc. jewelry	The state of the s
☑ Yes. Describe	_{\$} 150.00
13. Non-farm animals Examples: Dogs, cats, birds, horses	Annual to the same super little content of the children and the
☑ No	
Yes. Describe	\$_0.00
4. Any other personal and household items you did not already list, including any health aids you did not	lief
☑ No	1
Yes. Give specific information	\$ 0.00
5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attache	
for Part 3. Write that number here	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

page 4 of 10

Part 4: Describe Your Financial Assets

Do you owi	n or have any legal or equitab	le interest in any of the following?	Current value of the portion you own? Do not deduct secured claim
40.01			or exemptions
16. Cash Example No	s: Money you have in your wall	et, in your home, in a safe deposit box, and on hand when you file your petitio	ın
			<u>\$ 20.00</u>
17. Deposits Example	s: Checking, savings, or other f	inancial accounts; certificates of deposit; shares in credit unions, brokerage h If you have multiple accounts with the same institution, list each.	ouses,
		Institution name:	
	17.1. Checking account:	Huntington National Bank	<u></u> \$_1.00
	17.2. Checking account: 17.3. Savings account:	Huntington National Bank	
	17.4. Savings account:		\$
	17.5, Certificates of deposit:		<u> </u>
	17.6. Other financial account:	Paypal	<u>\$</u> 0.00
	17.7. Other financial account:		\$
	17.8. Other financial account:		\$
	17.9. Other financial account:		\$
		unts with brokerage firms, money market accounts	
			\$
		ts in incorporated and unincorporated businesses, including an interest	in
an LLC, լ	partnership, and joint venture		
an LLC, ¡ ☑ No ☐ Yes. 0	partnership, and joint venture Name of entity: Give specific		p:
an LLC, p ☑ No ☐ Yes. 0 inform	partnership, and joint venture Name of entity: Give specific action about	% of ownershi	p:

page <u>5</u> of <u>10</u>

	s 2	nd other negotiable and non-negotiable instruments all checks, cashiers' checks, promissory notes, and money orders.	
Negotiable instruments	s include persona	our connect transfer to	
	ients are those y	ou cannot transfer to someone by signing or delivering them.	
☑ No ☐Yes. Give specific	Issuer name;		
information about			
them			\$
			\$
	-		\$
Detiment			
I. Retirement or pension Examples: Interests in I		gh 401/k) 402/h) thrift on in-	
□No	TO G EI GOAG NEOC	gh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plan	3
Yes. List each			
account separately.	Institution n	ame:	
Type of account:			\$
401(k) or similar pla	an:		\$
Pension plan:	 		\$
IRA:			\$
Retirement account	t: Dillards ESC	OP .	\$ 5,239.26
Keogh:			\$
Additional account:			\$
			Ψ
Additional account:			
Additional account: Security deposits and p	prepayments		\$
Security deposits and property of all unused Examples: Agreements we companies, or others	prepayments deposits you hav		
Security deposits and p Your share of all unused Examples: Agreements v companies, or others	prepayments deposits you hav	ve made so that you may continue service or use from a company	
Security deposits and property of all unused Examples: Agreements we companies, or others	prepayments deposits you hav	ve made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications	
Security deposits and property of all unused Examples: Agreements we companies, or others	prepayments deposits you hav with landlords, pre	ve made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications	
Security deposits and page of all unused Examples: Agreements we companies, or others No Yes	prepayments deposits you hav with landlords, pre Electric:	ve made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications	
Security deposits and page of all unused Examples: Agreements we companies, or others No Yes	orepayments I deposits you have with landlords, pre Electric: Gas:	ve made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications	
Security deposits and property deposits and	prepayments I deposits you have with landlords, pre Electric: Gas: Heating oil:	ve made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications	
Security deposits and page Your share of all unused Examples: Agreements we companies, or others No Yes	prepayments I deposits you have with landlords, pre Electric: Gas: Heating oil: Rental unit:	ve made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications	
Security deposits and page of all unused Examples: Agreements we companies, or others No Yes	prepayments I deposits you have with landlords, pre Electric: Gas: Heating oil: Rental unit:	ve made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications	
Security deposits and page of all unused Examples: Agreements we companies, or others No Yes	prepayments I deposits you have with landlords, pre Electric: Gas: Heating oil: Rental unit: Prepaid rent: Telephone:	ve made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications	
Security deposits and property deposits and property for share of all unused Examples: Agreements we companies, or others No Yes	Prepayments I deposits you have with landlords, pre Electric: Gas: Heating oil: Rental unit: Prepaid rent: Telephone: Water:	ve made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications	
Security deposits and page of all unused Examples: Agreements we companies, or others No Yes	Prepayments I deposits you have with landlords, presented in the second	ve made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications	
Security deposits and property deposits and	Prepayments I deposits you have with landlords, pre Electric: Gas: Heating oil: Rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other:	ve made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	
Security deposits and property of all unused Examples: Agreements we companies, or others No Yes	Prepayments I deposits you have with landlords, pre Electric: Gas: Heating oil: Rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other:	ve made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications	
Security deposits and property of all unused Examples: Agreements woompanies, or others No Yes	Prepayments I deposits you have with landlords, pre Electric: Gas: Heating oil: Rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other:	ve made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	
Security deposits and property of all unused Examples: Agreements we companies, or others No Yes	Prepayments I deposits you have with landlords, pre Electric: Gas: Heating oil: Rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other:	ve made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$\$ \$\$ \$\$ \$\$ \$\$ \$\$
Security deposits and property of all unused Examples: Agreements we companies, or others No Yes	Prepayments I deposits you have with landlords, pre Electric: Gas: Heating oil: Rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other:	ve made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	
Security deposits and property of all unused Examples: Agreements we companies, or others No Yes	Prepayments I deposits you have with landlords, pre Electric: Gas: Heating oil: Rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other:	ve made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$\$ \$\$ \$\$ \$\$ \$\$ \$\$

page <u>6</u> **of** <u>10</u>

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24. Interests in an education IR 26 U.S.C. §§ 530(b)(1), 529A		program, or under a qualified state tuition program.	
☑ No			
☐ Yes	Institution name and description, Sepa	arately file the records of any interests.11 U.S.C. § 521	(c):
			¢
			. Ψ <u> </u>
			φ . \$
			Ψ
25. Trusts, equitable or future i exercisable for your benefi		ing listed in line 1), and rights or powers	
☑ No	CONTRACTOR		CANALON CONTROL CONTRO
Yes. Give specific information about them			\$ <u>0.00</u>
	narks, trade secrets, and other intelled		marcuni.
✓ No			
Yes, Give specific			. 0.00
information about them			\$ 0.00
27. Licenses, franchises, and c	ther general intangibles		
		on holdings, liquor licenses, professional licenses	
☑ No	HE BERKEN MANTER AND A STATE COMMISSION AND AND AND AND AND AND AND AND AND AN		***************************************
Yes, Give specific			\$ 0.00
information about them			\$ <u>0.00</u>
	in en este en enceptera prior respers como contrato con como como como como como como como	BEALTHER BEAT BOOK IN LINE FOR THE STATE OF	www
Money or property owed to you	2		Current value of the
Money or property owed to you	17		Current value of the portion you own?
Money or property owed to you	?		
Money or property owed to you 28. Tax refunds owed to you	?		portion you own? Do not deduct secured
28. Tax refunds owed to you			portion you own? Do not deduct secured claims or exemptions:
28. Tax refunds owed to you ☑ No ☐ Yes. Give specific informa	tion	Federal:	portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you No Yes. Give specific informa about them, including you already filed the	tion y whether returns	Federal: State:	portion you own? Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00
28. Tax refunds owed to you ☑ No ☐ Yes. Give specific informa about them, including	tion y whether returns		portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you No Yes. Give specific informa about them, including you already filed the and the tax years	tion y whether returns	State:	portion you own? Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00
28. Tax refunds owed to you No Yes. Give specific informa about them, including you already filed the and the tax years	tion g whether returns	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00 \$ 0.00
28. Tax refunds owed to you No Yes. Give specific informa about them, including you already filed the and the tax years 29. Family support Examples: Past due or lump s	tion g whether returns	State:	portion you own? Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00 \$ 0.00
28. Tax refunds owed to you No Yes. Give specific informa about them, including you already filed the and the tax years 29. Family support Examples: Past due or lump so	tion g whether returns um allmony, spousal support, child supp	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.
28. Tax refunds owed to you No Yes. Give specific informa about them, including you already filed the and the tax years 29. Family support Examples: Past due or lump s	tion g whether returns um allmony, spousal support, child supp	State: Local:	portion you own? Do not deduct secured claims of exemptions. \$ 0.00 \$ 0.00 \$ 0.00 ent \$ 0.00
28. Tax refunds owed to you No Yes. Give specific informa about them, including you already filed the and the tax years 29. Family support Examples: Past due or lump so	tion g whether returns um allmony, spousal support, child supp	State: Local: Port, maintenance, divorce settlement, property settlem Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$ 0.00 \$ 0.00 \$ 0.00 ent \$ 0.00 \$ 0.00
28. Tax refunds owed to you No Yes. Give specific informa about them, including you already filed the and the tax years 29. Family support Examples: Past due or lump so	tion g whether returns um allmony, spousal support, child supp	State: Local: Port, maintenance, divorce settlement, property settlem Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$ 0.00
28. Tax refunds owed to you No Yes. Give specific informa about them, including you already filed the and the tax years 29. Family support Examples: Past due or lump so	tion g whether returns um allmony, spousal support, child supp	State: Local: Port, maintenance, divorce settlement, property settlem Alimony: Maintenance: Support: Divorce settlement:	\$ 0.00 \$
28. Tax refunds owed to you ☑ No ☐ Yes. Give specific informa about them, including you already filed the and the tax years 29. Family support Examples: Past due or lump s ☑ No ☐ Yes. Give specific informa	tion y whether returns um allmony, spousal support, child supp	State: Local: Port, maintenance, divorce settlement, property settlem Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$ 0.00
28. Tax refunds owed to you ☑ No ☐ Yes. Give specific informa about them, including you already filed the and the tax years 29. Family support Examples: Past due or lump s ☑ No ☐ Yes. Give specific informa 30. Other amounts someone ow Examples: Unpaid wages, dis Social Security be	tion y whether returns um allmony, spousal support, child supp tion	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: Property settlement:	\$ 0.00 \$
28. Tax refunds owed to you ✓ No Yes. Give specific informa about them, including you already filed the and the tax years 29. Family support Examples: Past due or lump so No Yes. Give specific informa 30. Other amounts someone ow Examples: Unpaid wages, dis Social Security ber	tion y whether returns um allmony, spousal support, child supp tion	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: Property settlement:	\$ 0.00 \$
28. Tax refunds owed to you ☑ No ☐ Yes. Give specific informa about them, including you already filed the and the tax years 29. Family support Examples: Past due or lump s ☑ No ☐ Yes. Give specific informa 30. Other amounts someone ow Examples: Unpaid wages, dis Social Security be	tion y whether returns um allmony, spousal support, child supp tion	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: Property settlement:	\$ 0.00 \$

page <u>7</u> **of** <u>10</u>

	er appen en y oog e ger o var ommer ommet van omboerelinkommen blokmanken om enterne om blok niet ble bo.		
31. Interests in insurance policies			
Examples: Health, disability, or life insurar	nce; health savings account (H	SA); credit, homeowner's, or renter's insurance	
✓ No			
Yes, Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
			\$
			\$
			\$
			·
32. Any interest in property that is due you If you are the beneficiary of a living trust, of property because someone has died.		turance policy, or are currently entitled to receive	^~~ <u>~</u>
☑ No			
Yes, Give specific information			_{\$} 0.00
			\$0.00
33. Claims against third parties, whether o	r not you have filed a lawsuit	or made a demand for navment	numark.
Examples: Accidents, employment dispute			
☑ No			w.w.
Yes. Describe each claim	and the state of t		0.00
TOO. DOOGNOO COON COON COON	·		<u>\$</u> 0.00
34. Other contingent and unliquidated clair	ns of every nature, including	counterclaims of the debtor and rights	
to set off claims	•	-	
✓ No	en normanemente en gener enserver fer ser en en fordelse fin de ekselen fels de det ûstelen ê fûsselen û fêls de bi ûs ûs ûs ûs ûs ûs.		***************************************
Yes. Describe each claim			s 0.00
			\$
	SHAMMARING AMMARIAN PROGRAMMARING AMARING STANDARD STANDA		j.
35. Any financial assets you did not alread	y list		
☑ No	ranner di distributa mengenera serse au en senera serse en		
Yes, Give specific information			\$ 0.00
'			3
CO Add the deller welve of all african again	- from Dort A traduding and	anti	
36. Add the dollar value of all of your entried for Part 4. Write that number here		•	s 5,261.26
101 CO 41 FILLIO WILL HAMIDON HOLD		_	
			addinated de la constantion de service de se
Part 5: Describe Any Business-	Related Property You	Own or Have an Interest In. List any re	eal estate in Part 1.
O7 De vers euro en heur en la callanta en la callan	ble interset in any business	olated property?	
37. Do you own or have any legal or equital	pie interest in any business-i	elateu property?	
☑ No. Go to Part 6.			
Yes. Go to line 38.			
			Current value of the portion you own?
			Do not deduct secured claims
			or exemptions
38. Accounts receivable or commissions ye	ou already earned		
□No	•		
Yes. Describe	### ### ### ##########################	уну унуунун дог ит чуул өрөгүүл үүү, онуу, өнөү, өнөү үчүүч илимин татамын тат	
			\$
39. Office equipment, furnishings, and sup	plies		wa.
		achines, rugs, telephones, desks, chairs, electronic devices	
□No	•		
Yes, Describe	ann an amar seannan eileanna, ea ann ar easan, ea ann a-ann a-ann ear-ear, ear-ear ann ann an ann a-ann a-ann a		s
Based on the contract of the c		они съветскито от о	JT

page <u>8</u> **of** <u>10</u>

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade		
☐ No ☐ Yes. Describe		\$
41. Inventory No		
☐ Yes. Describe		\$
42. Interests in partnerships or joint ventures No	ummon VI-00-00 VI-00-1-1 tod-viduaneme as as durant annual	
Yes. Describe Name of entity:	6 of ownership:	
	% %	\$ \$
	%	\$
43. Customer lists, mailing lists, or other compilations No		
Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
Yes. Describe		\$
44. Any business-related property you did not already list	tancering tagencing) to be reliable and led the season man are appropriate extra-	
Yes. Give specific information		\$
		\$
		\$
		\$\$
		\$
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attack for Part 5. Write that number here	ned →	\$ 0.00
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have If you own or have an interest in farmland, list it in Part 1.	an Interest In.	
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property. No. Go to Part 7. Yes. Go to line 47.	n	
		Current value of the portion you own? Do not deduct secured claims
47. Farm animals Examples: Livestock, poultry, farm-raised fish	20	or exemptions.
☐ No ☐ Yes		
		\$

page 9 of 10

48. Crops—either growing or harvested			
☐ No ☐ Yes. Give specific information			\$
49. Farm and fishing equipment, implements, machinery, fixtures	, and tools of trade	mungangan kujuh nganun pungan pungan pungan kumban manakan kuman mengan manakan pangangan pangan pengan pengan	.
☐ Yes			\$
50. Farm and fishing supplies, chemicals, and feed			
Yes	Ped assed as ratio to see secondar residences to a many assessment over a second		\$
51. Any farm- and commercial fishing-related property you did no	ot already list	onegasin v en protes na ova entre sentre sentenan en europa, en en trestera film v album en europa hanne.	· · · · · · · · · · · · · · · · · · ·
Yes. Give specific information,	MARIE 1944 had 1944 formale had not been furthered parameter announce of the object and distributed by		\$
52. Add the dollar value of all of your entries from Part 6, including for Part 6. Write that number here			\$ 0.00
	d on an administrative are some and an account with conservation and are some and account and the S. A. A. some and account and account and account and account and account account account and account accoun	anut filad as a fire fil tradit remanusculature sandidate ana escilit remanuta ant estitue a aces and a tradit	were were the service and service and service AS St. of AS A. AS A. of AS A
Part 7: Describe All Property You Own or Have a	n Interest in That	You Did Not List Above	
53. Do you have other property of any kind you did not already lise Examples: Season tickets, country club membership	st?		
☑ No ☐ Yes. Give specific	kendel kalakan kenne kisilan colonia kanan menuncun kenne kanan consistenti dan melakat kenne kanan Mila	rich (Madilbert II der in 16 de in a rou de faire ab an hie de de in 16 de in 16 de in a de anti-de in de anti-de indice a de anti-de in 16 de in 1	
information		Ad Commission of the Commissio	
	VI IV/III/IV/II IV VI III VI VI III VI IV/III IV/III IV/III III		
54. Add the dollar value of all of your entries from Part 7. Write th	at number here	→	<u>\$</u> 0.00
Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2			\$ 75,000.00
56. Part 2: Total vehicles, line 5	\$ <u>3,500.00</u>	-	
57. Part 3: Total personal and household items, line 15	\$ <u>4,050.00</u>	-	•
58. Part 4: Total financial assets, line 36	\$_5,261.26	-	
59. Part 5: Total business-related property, line 45	\$ <u>0.00</u>	-	
60. Part 6: Total farm- and fishing-related property, line 52	\$ <u>0.00</u>	-	
61. Part 7: Total other property not listed, line 54	+\$0.00	-	
62. Total personal property. Add lines 56 through 61	_{\$} 12,811.26	Copy personal property total →	+ _{\$} 12,811.26
63. Total of all property on Schedule A/B. Add line 55 + line 62			\$ <u>87,811.26</u>

Fill in this information to identify your case:			
	\$10 -1 00-\$		
Debtor 1 Susan D. Workman First Name Middle Name	Last Name		
Debtor 2 (Spouse, if filing) First Name Middle Name			
	Last Name		
United States Bankruptcy Court for the: Northern District of Ohio	,	-,	
Case number 17-14630 (If known)			Check if this is a amended filing
	····		amended ming
Official Form 106C			
		_	
Schedule C: The Proper	ty You C	laim as Exempt	4/16
Be as complete and accurate as possible. If two married pr Using the property you listed on <i>Schedule A/B: Property</i> (C space is needed, fill out and attach to this page as many co your name and case number (if known).	Official Form 106A/B) as your source, list the property that :	you claim as exempt. If more
For each item of property you claim as exempt, you muspecific dollar amount as exempt. Alternatively, you muspecific dollar amount as exempt. Alternatively, you muspecificable statutory limit. Some exemptions—sometirement funds—may be unlimited in dollar amount. I limits the exemption to a particular dollar amount and would be limited to the applicable statutory amount.	ay claim the full fai uch as those for he However, if you cla	ir market value of the property being alth aids, rights to receive certain b im an exemption of 100% of fair ma	g exempted up to the amount enefits, and tax-exempt rket value under a law that
Part 1: Identify the Property You Claim as Ex	cempt		
 Which set of exemptions are you claiming? Check You are claiming state and federal nonbankruptcy You are claiming federal exemptions. 11 U.S.C. § For any property you list on Schedule A/B that you 	exemptions. 11 U.S 522(b)(2)	S.C. § 522(b)(3)	
	nt value of the on you own	Amount of the exemption you claim	Specific laws that allow exemption
	the value from	Check only one box	alle es Colle es delles arabandos es delles de la colle es. Alle es de la colle
383 E. 327th St.	lule A/B	for each exemption	a Estima Busa nilla Billa Sollia III kan asarta da Asi Asarta kan asarta da Asia da Balanda da Asia da Asia da Asia
Brief	\$ 75,000.00	☑ \$ 136,925.00	2329.66(A)(1)(b) - \$136,925.00
description:	+	100% of fair market value, up to	
Line from Schedule A/B; 1.1		any applicable statutory limit	
2003 Honda Clvic Brief			2329.66(A)(2) - \$3,500.00
description:	\$ 3,500.00	\$ 3,500.00	
Line from		100% of fair market value, up to any applicable statutory limit	
Schedule A/B: 3,1 Household goods - 2 dressers, 2 beds, 1 couch, 2			2329.66(A)(4)(a) - \$2,000.00
Brief chairs, living room table and chairs, 1 refrigerator, 1 stove, 1 washer and dryer	\$ 2,000.00	 \$_2,000.00	2025,000,000,000
Line from		100% of fair market value, up to any applicable statutory limit	
Schedule A/B: 6			
O Assessmentalists of the first			
 Are you claiming a homestead exemption of more (Subject to adjustment on 4/01/19 and every 3 years at 		ed on or after the date of adjustment.)	
 3. Are you claiming a nomestead exemption of more (Subject to adjustment on 4/01/19 and every 3 years at IV No □ Yes. Did you acquire the property covered by the exemption of more than 1/2 and every 3 years at 1/2 and e	fter that for cases file		

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of <u>2</u>

Susan D. Workman

Last Name

Case number (If known) 17-14630

Part 2:	Α
	_

dditional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the	Amount of the exemption you claim.	Specific laws that allow exemption
	portion you own Copy the value from Schedule A/B	Check only one box for each exemption	
Electronics - 2 TVs, 2 DVD players, 1 gaming conso Brief Smart phone, laptop, PC description:	e, \$ <u>1,500.00</u>	☑ _{\$} 1,500.00	2329.66(A)(4)(a) - \$1,500.00
Line from Schedule A/B; 7		100% of fair market value, up to any applicable statutory limit	0
Brief Collectibles of value - Books description:	\$ <u>100.00</u>	\$ 100.00	2329.66(A)(4)(a) - \$100.00
Line from Schedule A/B: 8		100% of fair market value, up to any applicable statutory limit	
Clothing - Clothing Brief description:	\$300,00	\$ 300.00	2329.66(A)(4)(a) - \$300.00
Line from Schedule A/B: 11		100% of fair market value, up to any applicable statutory limit	9
Jeweiry - Misc. jeweiry Brief description:	<u>\$150.00</u>	\$ 150.00	2329.66(A)(4)(b) - \$150.00
Line from Schedule A/B: 12 Cash On Hand		100% of fair market value, up to any applicable statutory limit	71.154
Brief description:	\$20.00	\$ 20.00	2329.66(A)(3) - \$20.00
Line from Schedule A/B: 16	and the same of th	100% of fair market value, up to any applicable statutory limit	
Brief Huntington National Bank Checking description:	\$_1.00	\$ 1.00	2329.66(A)(3) - \$1.00
Line from Schedule A/B: 17.1 Huntington National Bank Savings		100% of fair market value, up to any applicable statutory limit	
description:	\$_1.00	\$ 1.00	2329.66(A)(3) - \$1.00
Line from Schedule A/B: 17.3 Dillards ESOP Brief		☐ 100% of fair market value, up to any applicable statutory limit	2329.66(A)(10)(b) - \$5,239.26
description:	\$ 5,239.26	 ✓ \$ 5,239.26 ✓ 100% of fair market value, up to 	2329.00(A)(10)(b) - \$5,239.26
Line from Schedule A/B; 21		any applicable statutory limit	
Brief description:	\$	\$\$100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	:
Brief description:	\$	\$\$ 100% of fair market value, up to	:
Line from Schedule A/B: Brief		any applicable statutory limit	
description:	\$	\$100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	\$\$100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	:

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 2 of 2

1				
Fill in this information to identify your cas	et			
Susan D. Workman				
Debtor 1 First Name Middle N	ame Last Name			
Debtor 2 (Spouse, if filing) First Name Middle N	iame Last Name			
, , , , , , , , , , , , , , , , , , , ,				
United States Bankruptcy Court for the: Northern	District of Ohio			
Case number 17-14630			☐ Chec	cif this is an
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			amen	ded filing
055 15 4005				
Official Form 106D				
Schedule D: Creditors	s Who Have Claims Secur	ed by Prop	erty	12/15
Be as complete and accurate as possible.	If two married people are filing together, both are e	qually responsible fo	or supplying corre	ect
information. If more space is needed, copy	/ the Additional Page, fill it out, number the entries,			
additional pages, write your name and cas	e number (if known).			
1. Do any creditors have claims secured b	y your property?			
	n to the court with your other schedules. You have noth	ing else to report on t	nis form,	
Yes. Fill in all of the information below.				
Part 1: List Ali Secured Claims				
		Column A	Column B	Column C
	ore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2.	Announce of Grants	Value of collatera	728 Mar. 1000 Ma
	abetical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion (fany
2.1] On you Loop	Describe the property that secures the claim:	\$87,848.00	s 75,000.00	\$ 12,848.00
Ocwen Loan Creditor's Name	383 E. 327th St \$75,000.00	9	<u> </u>	<u> </u>
12650 Ingenuity Dr	300 E. 027 (1 Ot \$70,000.00			
Number Street				
	As of the date you file, the claim is: Check all that apply			
Orlando FL 32826 City State ZIP Code	☐ Contingent			
·	Unliquidated			
Who owes the debt? Check one. Debtor 1 onfy	Disputed			
Debtor 2 only	Nature of lien, Check all that apply,			
Debtor 1 and Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien)			
Check if this claim relates to a	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)			
community debt Date debt was incurred 2004	Last 4 digits of account number 0997	_		
2.2 Realtime Resolutions	Describe the property that secures the claim:	\$34,243.00	\$ 75,000.00	\$ 0.00
Creditor's Name	383 E. 327th St \$75,000.00			
1750 Regal Row Ste 120				
2333				
Dallas TV 75325	of the date you file, the claim is: Check all that apply			
Dallas TX 75235 Gity State ZIP Code	Contingent	•		
Who owes the debt? Check one.	Unliquidated			
Debtor 1 only	Disputed			
Debtor 2 only	Nature of lien. Check all that apply.			
Debtor 1 and Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
☐ At least one of the debtors and another ☐	Statutory lien (such as tax lien, mechanic's lien)			
☐ Check if this claim relates to a community debt	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Date debt was incurred 2004	Last 4 digits of account number 3820	_		
	atriana A. anathia wasa Walta that iliyata kara	\$ 122 001 00	***************************************	disini ti 1946 i 1946 ushto serenci vata issinateoksesa oromo

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

De	btor	1

Susan D. Workman

First Name Middle Name

Case number (if known) 17-14630

	Part 2:	List Others to Be Notified for a Debt That You Already Liste) C
--	---------	--	-----

Last Name

	Ali sila ili, anciados procupos varantes de californis acestran por constante de constante de constante de con	\;\!\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	That Tou Alleady			
aç ye	ency is trying to collect from you for a del	ot you owe to he debts that	someone else, list the you listed in Part 1, li	a debt that you already listed in Part 1. For example, if a collection e creditor in Part 1, and then list the collection agency here. Similarly, if st the additional creditors here. If you do not have additional persons to		
	Countrywide Home Loans	99. (40.00) 19615, 7.00(1) 1.0000016		On which line in Part 1 did you enter the creditor? 2.1		
	Name			Last 4 digits of account number		
	4500 Park Granada Street			Highlian water and the second		
				TARRET SET THE		
	Calabasas	CA	91302	TOTAL		
		State	ZIP Code			
	McGlinchey Stafford			On which line in Part 1 did you enter the creditor? 2.1		
	Name 25550 Chagrin Blvd, Ste. 406			Last 4 digits of account number		
	25550 Chagrin Blvd. Ste. 406 Street			GER CEALS STATE OF THE STATE OF		
				125 CET 125 CE		
	Beachwood	ОН	44022	eynen		
	City	State	ZIP Code	UI TINIGRA TO CONTROL		
	Mortgage Electronic Registration	Systems		On which line in Part 1 did you enter the creditor? 2.1		
	1901 East Voorhees Street Suite	C		Last 4 digits of account number		
	Street			######################################		
				HVKIZIKS		
	Danville city	IL State	61834 ZIP Code	45.10		
_	CONTROL CARRANTE AND ACTOR OF A PROPERTY AND ACTOR OF A CONTROL OF A C			On which line in Part 1 did you enter the creditor? 2.1		
	Shellpoint Mortgage Servicing Name			Last 4 digits of account number		
	PO Box 10826			ASIAN MARIEN		
	Street			MARKETER		
	Greenville	SC	29603	N. METERNAN		
	City	State	ZIP Code	REKRIASIRA		
*	Treasurer of Lake County	creek saared ermoner oorsoopsproonenss van		On which line in Part 1 did you enter the creditor? 2.1		
	Name	.,		Last 4 digits of account number		
	PO Box 490 Street			HARTEMATE		
	Street					
	Painesville	ОН	44077	sin Milanoni		
	City	State	ZIP Code	CANALIZABATE		
			DEMONSTRATION OF A PARTICULAR ASSESSMENT AND ADMINISTRATION OF A PARTICULAR ASSESSMENT AND ADMINISTRATION OF A	On which line in Part 1 did you enter the creditor?		
	Name			Last 4 digits of account number		
	Street			лыная		
				WHENES		
				Арелменн		
	City	State	ZIP Code	Open March		

Fill in this inf	ormation to identify yo	ur case:					
Daletand	Susan D. Workman			•			
Debtor 1	First Name	Middle Name		Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name		Last Name			
United States Ba	ankruptcy Court for the: No	rthern District of (Ohio				
		Turierii District or C	Offic				Check if this is an
Case number (If known)	17-14630						amended filing
Official F	orm 106E/F						
		itors W	/ho ł	Have Unsec	ured Clair	ns	12/15
List the other p A/B: Property (creditors with p needed, copy to any additional p	arty to any executory o Official Form 106A/B) a partially secured claims	contracts or un and on <i>Schedu</i> is that are liste out, number t is and case num	nexpired ule G: Ex d in Sch the entrie mber (if l	nedule D: Creditors Who es in the boxes on the I known).	ılt in a claim. Also I Unexpired Leases o Have Claims Secu	ist executory co (Official Form 19 red by Property	ontracts on <i>Schedule</i> 06G). Do not include any
1. Do any cred	litors have priority uns	ecured claims	s against	t you?			. ***
□ No. Go te	o Part 2.						
✓ Yes.		olaima Ifa av	ditorbo				rately for each claim. For
each claim li	sted, identify what type o	of claim it is, If a	a claim h	as both priority and nonp	priority amounts, list t	hat claim here ar	d show both priority and
nonpriority a unsecured c	mounts. As much as pos alms, fill out the Continu	sible, list the c ation Page of F	laims in a Part 1. If	alphabetical order accord more than one creditor h	ling to the creditor's r olds a particular clair	name. If you have n. list the other c	e more than two priority reditors in Part 3.
				ns for this form in the inst			
						Total claim	Priority Nonpriority amount amount
2.1 Internal	Revenue Service					s Unknown	777777 C 2 T 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2
Priority Credito			Last 4	digits of account numbe	r	\$ OHKHOWH	\$ Unknown \$ Unknown
1240 E.	9th St. Rm. 493		When v	was the debt incurred?	Debtor timely fil	ed extensions	s for 2015 and 2016
	olvency Dept.		As of th	he date you file, the clair	n is: Check all that anni	v	
Clevelan		44199	_	ntingent	ii is. Oneok ali tilat appi	у.	
City	State	ZIP Code		liquidated			
Who incurr Debtor 1	ed the debt? Check one.		☐ Disp	puted			
Debtor 2	only		Туре о	of PRIORITY unsecured	claim:		
	and Debtor 2 only		☐ Don	mestic support obligations			
	one of the debtors and anoth		✓ Tax	ces and certain other debts y	ou owe the government		
	f this claim is for a comr	nunity debt		ims for death or personal injudicated	ury while you were		
is the claim	subject to offset?		_				
Yes				•		_	
^{.2} Ohio De _l	partment of Taxatio	n	Last 4 o	digits of account number	r	_{\$} Unknown	\$Unknown \$Unknown
Priority Credito	r's Name nkruptcy Division		When w	was the debt incurred?	2015-16	·	· · · · · · · · · · · · · · · · · · ·
Number PO Box	Street		As of th	he date you file, the clain	n is: Check all that anol	W	
Columbu		43216-0000	☐ Con	•	Tion officer an that appl	y-	
City	State	ZIP Code		iquidated			
	ed the debt? Check one.		☐ Disp	puted			
Debtor 1			Type o	of PRIORITY unsecured	claim:		
Debtor 2	only and Debtor 2 only		☐ Dom	nestic support obligations			
	and Debtor 2 only ne of the debtors and anoth	er	✓ Taxe	es and certain other debts y	ou owe the government		
	this claim is for a comm			ims for death or personal inju	ury while you were		
	subject to offset?		1700004	xicated er. Specify			
<u>✓</u> No				- e		-	

Official Form 106F/F

Yes

De	hta	r 1

Susan D. Workman

Firet	Name

Last	Name

	17-14630	
Case number (if known)		

	First Name Middle Name Last Name		
Pa	rt 2: List All of Your NONPRIORITY Unsecured Claims		
3.	Do any creditors have nonpriority unsecured claims against you No. You have nothing to report in this part. Submit this form to the Yes		
4.	List all of your nonpriority unsecured claims in the alphabetical of nonpriority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, I claims fill out the Continuation Page of Part 2.	. For each claim listed, identify what type of claim it is. Do not	list claims already
4.1	_Afni	7750	Total claim
	Nonpriority Creditor's Name Po Box 3097	Last 4 digits of account number 7759 When was the debt incurred? 2013	<u>\$_123.00</u>
	Number Street		
	Bloomington IL 61702 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Student loans Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify DEBTOR DISPUTES THE VALIDITY OF	
			_{\$} 125.00
+.2	Ffcc Clvland Nonpriority Creditor's Name	Last 4 digits of account number 2523 When was the debt incurred? 2016	\$ 123,00
	24700 Chagrin Blvd Suite 205 Number Street		
	Clausiand	As of the date you file, the claim is: Check all that apply.	
	Cleveland OH 44122 City State ZIP Code Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated	
	☑ Debtor 1 only	☐ Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans Obligations arising out of a separation agreement or divorce	
	Check if this claim is for a community debt	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
.3	· Yes Gracerecovry		SA-CAMPATAN ARIAN MINISTER (AN ARIAN MANASA AN ARIAN MANASA SANASA SANASA SANASA SANASA SANASA SANASA SANASA S
	Nonpriority Creditor's Name	Last 4 digits of account number 74N1 When was the debt incurred? 2012	\$1,577.00
	8346 Tyler Bv Suite C Number Street	When was the debt incurred? 2012	
	Mentor OH 44060	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	☐ Unliquidated ☐ Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
	Yes	— Опот. орешу	

Debtor	•

Susan D. Workman

Case number (if known)___

	First Name Middle Name Last Name		_	V	
	rt 2: List All of Your NONPRIORITY Uns		-		· · ·
	Do any creditors have nonpriority unsecured on No. You have nothing to report in this part. Sure Yes				
	List all of your nonpriority unsecured claims in nonpriority unsecured claim, list the creditor separ included in Part 1. If more than one creditor holds claims fill out the Continuation Page of Part 2.	ately for each claim.	For each claim listed, identify wh	at type of claim it is. Do not	list claims aiready npriority unsecured
4.4	I C System		Last 4 digits of account number	9001	Total claim
	Po Box 64378 Number Street		When was the debt incurred?	2012	<u>\$123.00</u>
	Saint Paul MN City State	55164 ZIP Code	As of the date you file, the claim	is: Check all that apply.	
	Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only	ZIF Code	☐ Contingent ☐ Unliquidated ☐ Disputed		
	Debtor 1 and Debtor 2 only At least one of the debtors and another		Type of NONPRIORITY unsect Student loans Obligations arising out of a sepa		
	☐ Check if this claim is for a community debt Is the claim subject to offset? ✓ No ☐ Yes		that you did not report as priority Debts to pension or profit-sharin Other, Specify	rclaims g plans, and other similar debts	
4.5	Jerry Carr Nonpriority Creditor's Name 4443 West 56th St. Number Street	nt sauce and an entire description and a second description of the second of the second secon	Last 4 digits of account number When was the debt incurred?		_{\$} Unknown
	Cleveland OH	44144	As of the date you file, the claim	is: Check all that apply.	
	City State Who incurred the debt? Check one. Debtor 1 only	ZIP Code	☐ Contingent ☐ Unliquidated ☑ Disputed		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another		Type of NONPRIORITY unsect Student loans Obligations arising out of a sepa		
	☐ Check if this claim is for a community debt Is the claim subject to offset? ✓ No ☐ Yes		that you did not report as priority Debts to pension or profit-sharing Other. Specify Monies Loaned	claims g plans, and other similar debts	
1.6	Lake Health Nonpriority Creditor's Name	en e	Last 4 digits of account number	COSCAMO COSCA ZONA O YMBOWY COMERCIAN CONCENSOR CONTROL CONTRO	\$500.00
	7590 Auburn Rd Number Street		When was the debt incurred?	•	
	Painesville OH	44077	As of the date you file, the claim	is: Check all that apply.	
	City State Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another		Type of NONPRIORITY unsecu	ıred claim:	
	☐ Check if this claim is for a community debt		☐ Student loans ☐ Obligations arising out of a sepa		
	Is the claim subject to offset? No Yes		that you did not report as priority Debts to pension or profit-sharing Other. Specify Medical Service	g plans, and other similar debts	

First Name Middle Name Last Name

		17-14630		
Case number	(if known)			

Part 3:	List Others to	Ве	Notified	About a	Debt	That	You	Aiready	Listed

additional creditors here. If you	do not have	additional perso	more than one creditor for any of the debts that you listed in Parts 1 or 2, list the ns to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
AT&T			On which entry in Part 1 or Part 2 did you list the original creditor?
ATTN: Bankruptcy			Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street 1801 Valley View Lane			Part 2: Creditors with Nonpriority Unsecured Claim
Farmer's Branch	TX State	75234 ZIP Code	Last 4 digits of account number
AT&T	* CAMACA AMOUNT TO ANGEL SHOW A SHOPPING STOPPED STOPP		On which entry in Part 1 or Part 2 did you list the original creditor?
ATTN: Bankruptcy			Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street 1801 Valley View Lane		 -	✓ Part 2: Creditors with Nonpriority Unsecured Claims
Farmer's Branch	TX State	75234 ZIP Code	Last 4 digits of account number
University Hospitals	The tack the latest from the proper paper and page		On which entry in Part 1 or Part 2 did you list the original creditor?
11100 Euclid Ave			Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Attn: Patient Billing Cleveland	ОН	44106-0000	Claims
City	State	ZIP Code	Last 4 digits of account number ———————————————————————————————————
Willow Run Veterinary C	linic		On which entry in Part 1 or Part 2 did you list the original creditor?
30125 Euclid Ave. Number Street			Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Wickliffe _{City}	OH State	44092 ZIP Gode	Claims Last 4 digits of account number
\$7 (1994) \$2,4 (1994) \$3,0 (1995) \$4,0 (1995) \$4,0 (1994) \$4,0 (19	A STATE OF THE PARTY OF THE PAR		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		**	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number
Name	whele consideration continues was little from the continues of the continu	4944-1681-164-164-164-164-164-164-164-164-164-16	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number

First Name Middle Name

Case number (if known) 17-14630

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	Total claim	0.00
Total claims from Part 2	6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.		0.00
**************************	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority			
*************************	 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other 	6g.	\$\$	0.00

Fill in this in	formation to iden	tify your case:					
Debtor	Susan D. Workman						
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse if filing)	First Name	Middle Name	Loof Name				
(Spouse if filing)		Middle Name	Last Name				
United States i	sankruptcy Court for t	the Northern District of Ohio					
Case number	17-14630		11				
(If known)							

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company	with whom you	have the contract or lease	State what the contract or lease is for
2.1	anninger in de en de en		кив жана жир сти стана жине се индестивнос	
).uumuud	Name			
	Street			<u> </u>
	City	State	ZIP Code	
2.2	Name			<u> </u>
	Street			_
2.3	City	State	ZIP Code	
	Name			<u> </u>
	Street			<u> </u>
	City	State	ZIP Code	_
2.4	en e	en yezh an managan an eus an eus en eus	MP IN AND MENTAL PROPERTY AND THE SHAPE AND	
	Name	-		_
	Street			_
	City	State	ZIP Code	
2.5	Name			
	Street			_
	City	State	ZIP Code	- -

Official Form 106G

Schadula G. Evacutory Contracts and (Inavnirad Laseas

nace 1 of 1

					•
Fill in this	information to ider	ntify your case:			
	Susan D. Workma				
Debtor 1	First Name	Middle Name	Last Name]	
Debtor 2 (Spouse, if fili	ng) First Name	Middle Name	Louthland		
United State	es Bankruptev Court for	the: Northern District of Ohio	Last Name		
Case number	47.44000	and, Moraletti District di Offio	• ,		
(If known)	91				
					Check if this is amended filing
Official	Form 106H				·
Sched	lule H: Yo	_ ur Codebtor	S	·	40//
and number	are people or entitie gether, both are equ the entries in the b r (if known). Answe	oxes on the left Attach	any debts you may have plying correct information the Additional Page to the	e. Be as complete and accurate on. If more space is needed, cop is page. On the top of any Addi	as possible. If two married peop by the Additional Page, fill it out, tional Pages, write your name a
1. Do you	have any codebtors	? (If you are filing a joint	case, do not list either spo	use as a codebtor.)	
Yes					
2. Within t	he last 8 years, hav	e you lived in a commur	nity property state or terr	itory? (Community property state	s and torritorios includ-
	oamorria, laario, 20	uisiana, Nevada, New Mo	exico, Puerto Rico, Texas,	Washington, and Wisconsin.)	s and territories include
	Go to line 3.				
	No	mer spouse, or legal equi	ivalent live with you at the	time?	
==		nity state or territory did v	ou live?	Fill in the name and curren	
		,		This is the name and curren	address of that person.
Ī	Name of your spouse, forme	er spouse, or legal equivalent			
		, , , , , , , , , , , , , , , , , , ,			
Ā	Number Street				
<u> </u>	Dity	State	*10 -	<u></u>	
	•		ZIP Code		
Schedule	e D (Official Form 1	ouedlor only it that hers	On is a duaranter er eec	ebtor if your spouse is filing wit igner. Make sure you have liste hedule G (Official Form 106G). L	1.24
Column	1: Your codebtor			Column 2: The cred	tor to whom you owe the debt
				Check all schedules	
1					and control
Name				Schedule D, line	
Street				Schedule E/F, lii	
				Schedule G, line	
City 2	anniana ang panjaga ang pagga at anniananana 160 andaga 147 annian at anni ang ang 1,50 ag ang manan	State	ZIP Code		том не учет не
Name				Schedule D, line	
	_			Schedule E/F, lir	
Street				Schedule G, line	
City		State	ZIP Code		
3		The state of the s			
Name				Schedule D, line	
Street				Schedule E/F, lin	
				Schedule G, line	-
City		State	ZIP Code	 _	

17-14630-aih Doc 7 FILED 08/16/17 ENTERED 08/16/17 15:43:23 Page 30 of 55

Robadula H. Varm Cadabtara

name 1 of 1

Official Form 108L

Fill in this information to identify	volir caso.					
Debtor 1 Susan D. Workr	nan Middle Name	Last Name				
Debtor 2 (Spouse, If filing) First Name	Middle Name	Last Name				
		Last Name				
United States Bankruptcy Court for the: Case number 17~14630	Notine in District of Office	•				
Case number 17-14030 (If known)				Check if t		
				Same in	nended filing plement showing postp	etition chapter 13
					e as of the following da	
Official Form 106I				MM / [DD / YYYY	
Schedule 1: You	ir Income				_	12/15
Be as complete and accurate as posupplying correct information. If you are separated and your spouseparate sheet to this form. On the	ou are married and not fili use is not filing with you, o top of any additional pag	ng jointly, and yo do not include inf	ur spouse ormation a	is living with ; bout your spo	you, include information ouse, If more space is ne	about your spouse. eded, attach a
1. Fill in your employment				Saren er her her han er	sink illinkölligikkenkenkenkeisissikk	
Information.		Debtor 1			Debtor 2 or non-fili	ng spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employ	ed		Employed Not employed	
Include part-time, seasonal, or self-employed work.						
Occupation may include student	Occupation	Paralegal			· · · · · · · · · · · · · · · · · · ·	
or homemaker, if it applies.		Robert J. B	erk Co. I	ΡΔ		
	Employer's name					
	Employer's address	2000 Lee R	d. Ste. 1	14		
		Number Street			Number Street	
		Cleveland,		P Code	City	State ZIP Code
	How long employed the	•			,	
Part 2: Give Details About	Monthly Income					
Estimate monthly income as of spouse unless you are separated.	the date you file this form	. If you have nothi	ng to report	for any line, w	rite \$0 in the space, Includ	le your non-filing
If you or your non-filing spouse habelow. If you need more space, at			rmation for	all employers f	or that person on the lines	
			F	or Debtor 1	For Debtor 2 or non-filling spouse	
List monthly gross wages, sala deductions). If not paid monthly,			2. \$_	2,299.92	\$	
3. Estimate and list monthly over	time pay.		3. +\$	0.00	+ \$	
4. Calculate gross income. Add lir	ne 2 + line 3.		4. \$_	2,299.92	\$	

Official Form 106l Schedule I: Your Income page 1

Debtor 1

Susan D. Workman

First Name	Middle Name	Last Name	

Case number (if known) 17-14630

		F¢	r Debtor 1	1000 1000 1000 1000 1000 1000 1000 100	For Debtor 2 non-filing spo				
Copy line 4 here	→ 4.	\$	2,299.92	- Mariei	\$	************			
5. List all payroll deductions:			·-		· 				
5a. Tax, Medicare, and Social Security deductions	E-0		33.45		ф				
5b. Mandatory contributions for retirement plans	5a. 5b.	\$_ ¢	0.00	_	\$				
5c. Voluntary contributions for retirement plans	50. 5c.	Ф_ \$	0.00	_	\$				
5d. Required repayments of retirement fund loans	5d.	Ψ_ \$	0.00	_	\$				
5e. Insurance	5e.	Ψ_ \$	0.00	_	Ф <u> </u>				
5f. Domestic support obligations	5f.	Ψ_ \$	0.00	_	\$\$				
5g. Union dues	5g.	\$_ \$	0.00	_	φ \$				
5h. Other deductions. Specify:	5g. 5h.	+\$	0.00	_	+ ¢				
6. Add the payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.		. Ψ_	33.45	-	' J				
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_ \$	2,266.46	_	\$				
8. List all other income regularly received:									
8a. Net income from rental property and from operating a business, profession, or farm									
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_	0.00	_	\$	1144			
8b. Interest and dividends	8b.	\$_	0.00	_	\$				
8c. Family support payments that you, a non-filing spouse, or a depende regularly receive	ent			-		— —			
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	702.00		\$				
8d. Unemployment compensation	8d.	\$	0.00	_	\$				
8e. Social Security	8e.	\$	0.00	_	\$				
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$	0.00	_	\$				
8g. Pension or retirement income	8g.	œ	0.00		œ.				
8h. Other monthly income. Specify:	-	Ψ <u></u>	0.00	•	Φ				
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	8h. 9.	+ \$ \$	702.00] [+\$ \$	=			
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	2,968.46	+	\$		\$	2,968.4	6
11. State all other regular contributions to the expenses that you list in Sched Include contributions from an unmarried partner, members of your household, y friends or relatives.		pende	ents, your roo	omm	ates, and other		<u> </u>	-	
Do not include any amounts already included in lines 2-10 or amounts that are r	not ava	ailable	to pay expe	nses	s listed in Schedu	ıle J.		<u></u>	•
Specify:						11. 🛨	\$	0.0	0
2. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain Si	result <i>tatistic</i>	is the al Info	combined mormation, if it	onthl appl	ly income. ies	12.	\$	2,968.4	6
13. Do you expect an increase or decrease within the year after you file this fe	orm?							nbined Ithly incor	ne
Yes, Explain:									

Debtor

17-14630

17-14630 Case number (if known)

Official Form 106I Attachment for Additional Employment Information

Debtor / Debtor 2	Susan D. \			,	**In.
Occupation	Caterer			****	
Name of Employer	Taste of E	xcellence, Inc.			
Employer's Address	16888 Pe	earl Rd.	***		
	Number	Street			
	Strongsvi	lle, OH 44136			
	City		State	ZIP Code	
How long employed there?					
					1999-bis
Debtor / Debtor 2					
Occupation					
Name of Employer					
Employer's Address			<u> </u>		
	Number	Street			
					
	City		State	ZIP Code	-
How long employed there?					
Dobton / Dobton O	1		·		·
Debtor / Debtor 2					
Occupation				· · · · · · · · · · · · · · · · · · ·	
Name of Employer					
Employer's Address	ļ ———				
	Number	Street			
Hambara and H. O.	City		State	ZIP Code	
How long employed there?	<u></u>				
Debtor / Debtor 2					
Occupation 2					
Name of Employer					
Employer's Address	-				
Employer's Address	Ni washa w	Oh			
	Number	Street			
		\w			
How long ampleyed there?	City		State	ZIP Code	
How long employed there?		·			

Fill in this i	nformation to identify	your case:					
Debtor 1	Susan D. Workman						
	First Name	Middle Name	Last Name	Chec	k if this is:		
Debtor 2 (Spouse, if filing)) First Name	Middle Name	Last Name		amended	d filing	
United States	Bankruptcy Court for the:	Northern District of Ohio		L.A	suppleme	nt showing pos	tpetition chapter 13
Case number	17-14630		(· /		of the followin	g date:
(If known)				MM	/ DD / YY	YY	
Official F	orm 106J						
		ur Expenses					12/15
Be as comple- information, [f	te and accurate as po f more space is need/	essible. If two married peop	ole are fill	ing together, both are equa	ally respon	sible for supply	ring correct
(if known). An	swer every question.	ed, attach another sheet to	uns iorn	i. On the top of any addition	nal pages,	, write your nam	e and case number
Part 1:	Describe Your Hou	sehold					
1. Is this a join	nt case?		<u> </u>				
No. Go							
Yes. Doe	es Debtor 2 live in a s	eparate household?					
	No						
Constant l		Official Form 106J-2, Exper	nses for S	eparate Household of Debto	r 2		
	dependents?	☐ No	······································	AND COMPANY AND CO	And the second s	***************************************	
Do not list De Debtor 2.		Yes. Fill out this inform		Dependent's relationship to Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	the dependents'	each dependent	************	Son	EAAN MARKET COURTE	14	☐ No
names.							Yes
						_	No
							Yes
							No
							Yes
							No Yes
							No
							Yes
Do your expe	nses include people other than	☐ No					
yourself and	your dependents?	Yes	······				
art 2: Esti	mate Your Ongoin	g Monthly Expenses		And a second sec	The state of the s		
		ankruptcy filing date unles	S VOII ar	using this form as a num	.1	. 0:	
whenses as of	a date after the bankr	uptcy is filed. If this is a s	upplemer	tal Schedule J, check the	box at the	a Chapter 13 ca	ise to report
ppiicable date.							and min me
nclude expense	s paid for with non-c	ash government assistand	e if you l	know the value of			
		on Schedule I: Your Incom				Your expen	ses _{ido en e} ncioni
any rent for th	ne ground or lot.	enses for your residence.	Include fi	rst mortgage payments and	4.	\$_	0.00
If not include	ed in line 4:				4.	- "	
4a. Real est	ate taxes				4a.	\$	225.00
4b. Property	, homeowner's, or rent	er's insurance			4a. 4b.	Ψ \$	85.00
	aintenance, repair, and				40. 4c.	Ψ	75.00
	ner's association or co				46. 4d.	Ψ \$	0.00
Official Form 10	16 I				+u,	Ψ	0,00
Smooth Office 10	···	Schedule .	J: Your E	xpenses			nage 1

17-14630-aih Doc 7 FILED 08/16/17 ENTERED 08/16/17 15:43:23 Page 34 of 55

page 1

Debtor 1

Susan D. Workman

First Name Middle Name Last Name

Case number (if known) 17-14630

			3,5100,000,000,000,000,000,000	xpenses:
5	. Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6	. Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	225,00
	6b. Water, sewer, garbage collection	6b.	\$ \$	50.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	300.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	400.00
8.	Childcare and children's education costs	8,	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	50.00
0.		10.	\$ \$	50.00
1.	Medical and dental expenses	11.	\$	398.00
2.	Transportation. Include gas, maintenance, bus or train fare.		Ψ	
	Do not include car payments.	12.	\$	250.00
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	35.00
4.	Charitable contributions and religious donations	14.	\$	0.00
5.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	225.00
	15c. Vehicle insurance	15c.	\$ \$	
	15d. Other insurance. Specify:	15d.	\$	0.00
i.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
7.		10,	Ψ	
•	17a. Car payments for Vehicle 1	170	\$	0.00
	17b. Car payments for Vehicle 2	17a.		
		17b.	\$	
	17c. Other Specify:	17c.	\$	
	17d. Other. Specify:	17d.	\$	0.00
i.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	me.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	
	20c. Property, homeowner's, or renter's insurance	20c.	\$	•
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	
	20e. Homeowner's association or condominium dues	20e.	s	0.00

Debtor 1	Susan D. Workman First Name Middle Name Last Name Case numb	Case number (if known)			
	r. Specify:			22774 347000000000000000000000000000000000	
i. Other	п. орешу	21.	+\$	0.00	
			+\$		
	- Indiana de la companya de la comp		+\$		
2. Calc	ulate your monthly expenses.				
22a. A	Add lines 4 through 21.	22a.	\$	2,468.00	
22b. (Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 2	22a 22b.	\$		
and 2	22b. The result is your monthly expenses.	22c.	\$	2,468.00	
Calcul	ate your monthly net income.				
23a. (Copy line 12 (your combined monthly income) from Schedule I.	23a,	\$	2,968.46	
23b. (Copy your monthly expenses from line 22c above.	23b.	-\$	2,468.00	
	Subtract your monthly expenses from your monthly income.			500,46	
7	The result is your monthly net income.	23c.	\$	000.10	
Do you	u expect an increase or decrease in your expenses within the year after you file this form	n?			
	ample, do you expect to finish paying for your car loan within the year or do you expect your				
_	ige payment to increase or decrease because of a modification to the terms of your mortgage?	•			
No.		TOTO CONTROL TO THE TOTAL YOU WANTED THE TOTAL	ind worman commencer commencer		
✓ Yes	Explain here: No significant changes anticipated. Debtor's prescription e has ADHD and out-of-pocket co-pay is high. Debtor also a in the next two months and premiums are estimated.	expenses a inticipates	are high a getting h	s Debtor's son ealth insurance	

Debtor 1	Susan D. Wor	rkman		
•	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an at	ttorney to help you fill out bankruptcy forms?
☑ No ☐ Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the s that they are true and correct.	summary and schedules filed with this declaration and
* For Susan D. Workman	
Signature of Debtor 1	Signature of Debtor 2
Date 08/16/2017 MM / DD / YYYY	Date

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

	nformation to identify	y your case:				
	Cycen D. Werkman					
Debtor 1	Susan D. Workman	Middle Name	Last Name			
Debtor 2 Spouse, if filing) First Name	Middle Name	Last Name			
	Bankruptcy Court for the	Northern District of Ohi	o			=
ase number	17-14630				Г	Check if this is a
f known)		·-···			l	amended filing
fficial F	orm 107					
		ncial Affai	rs for Ind	ividuals Filing fo	or Bankruptcy	4/1
	· · · - · · · · · · · · · · · · · · · ·	-		ing together, both are equally		
ormation.	If more space is nee	ded, attach a separa	ate sheet to this f	orm. On the top of any addition	onal pages, write your nam	e and case
mber (if kn	iown). Answer every	question.				
art 1: 0	Sive Details About	t Your Marital Sta	tus and Where	You Lived Before		
. What is y	our current marital	status?				
☐ Marri	ed					
☑ Not n						
•	ne last 3 years, have	you lived anywhere	other than where	e you live now?		
☑ No	-					
✓ No Yes.	List all of the places y		years. Do not inclu	ude where you live now.		
✓ No Yes.	-			ude where you live now.		Dates Debtor 2.
✓ No Yes.	List all of the places y		/ears. Do not inclu	ude where you live now.		lived there
✓ No Yes.	List all of the places y		ears. Do not inclu Dates Debtor lived there	ude where you live now.		lived there ☐ Same as Debtor
✓ No ☐ Yes. Det	List all of the places y		pears. Do not include the pears. Dates Debtor lived there	ude where you live now.		Ilved there Same as Debtor
✓ No ☐ Yes.	List all of the places y		ears. Do not inclu Dates Debtor lived there	ude where you live now. 1. Debtor 2: Same as Debtor 1		lived there
V No ☐ Yes. Det	List all of the places y	ou lived in the last 3 y	pears. Do not include the pears. Dates Debtor lived there	Debtor 2: Same as Debtor 1 Number Street		Ilved there Same as Debtor
✓ No ☐ Yes.	List all of the places y		pears. Do not include the pears. Dates Debtor lived there	Debtor 2: Same as Debtor 1 Number Street	State ZIP Code	Same as Debtor From To
V No ☐ Yes.	List all of the places y	ou lived in the last 3 y	pears. Do not include the pears. Dates Debtor lived there	Debtor 2: Same as Debtor 1 Number Street	State ZIP Code	Same as Debtor From To Same as Debtor
V No ☐ Yes.	List all of the places y	ou lived in the last 3 y	pears. Do not include the pears. Dates Debtor lived there	Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1	State ZIP Code	Same as Debtor
V No ☐ Yes. Det Nu	List all of the places y	ou lived in the last 3 y	Pates Debtor lived there From To	Debtor 2: Same as Debtor 1 Number Street	State ZiP Code	Same as Debtor From To Same as Debtor
V No ☐ Yes.	List all of the places y	ou lived in the last 3 y	Prom	Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1	State ZIP Code	Same as Debtor From To Same as Debtor From From To Same as Debtor From
V No ☐ Yes. Det Nu Cit	List all of the places y otor:1: mber Street y	ou lived in the last 3 y	Prom	Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1	State ZIP Code	Same as Debtor From To Same as Debtor From From To Same as Debtor From
No Yes. Det Nu Cit	List all of the places y otor:1: mber Street y	ou lived in the last 3 y	Prom	Debtor 2: Same as Debtor 1 Number Street City Number Street		Same as Debto From To Same as Debto
No Del Pes. Nu Cit	List all of the places y ptor 1: mber Street y mber Street	State ZIP Code State ZIP Code	Prom From From From From Foo	Debtor 2: Same as Debtor 1 Number Street City Number Street	State ZIP Code	Same as Debto From To Same as Debto From To To

Statement of Financial Affairs for Individuals Filing for Bankruptcy

First Name

Middle	Mame	

Last Name

Case number (if known) 17-14630

Part 2:	Explain t	the S	Sources	Of	Your	Income

☐ No ☑ Yes, Fill in the details,				
	Debtor 1		Debtor 2	
	Sources of Income Check all that apply.	Gross Income (before deductions exclusions)	Sources of income and Check all that apply,	Gross Income (before deductions a exclusions)
From January 1 of current year u the date you filed for bankruptcy		\$ <u>14,432.40</u>	Wages, commissions bonuses, tips Operating a business	\$
For last calendar year: (January 1 to December 31, <u>2016</u>	✓ Wages, commiss bonuses, tips✓ Operating a busines	\$ <u>25,529.00</u>	Wages, commissions bonuses, tips Operating a busines.	\$
For the calendar year before that (January 1 to December 31, 2015 YYYY	Wagan complete	sions, \$ 26.577.84	☐ Wages, commissions bonuses, tips ☐ Operating a business	onemperanjung unuman kang kang kang kang kang kang kang ka
Include income regardless of whether the and other public benefit payments; pensions winnings. If you are filling a joint case and List each source and the gross income to No Yes. Fill in the details.	nat income is taxable. Exan sions; rental income; intered d you have income that yo from each source separate	st; dividends; money coll u received together, list i	e alimony; child support; Sociected from lawsuits; royalties it only once under Debtor 1. e that you listed in line 4.	
Include income regardless of whether the and other public benefit payments; pensions winnings. If you are filing a joint case and List each source and the gross income to No Yes. Fill in the details.	nat income is taxable. Exantsions; rental income; interested you have income that you from each source separate ebtor 1.	nples of other income are st; dividends; money coll ou received together, list i sly. Do not include income	e alimony; child support; Sociected from lawsuits; royalties it only once under Debtor 1. e that you listed in line 4. Debtor 2 Sources of income	; and gambling and lotte Gross income from
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Include income regardless of whether the and other public benefit payments; pensions winnings. If you are filing a joint case and List each source and the gross income of the No No Yes. Fill in the details. The January 1 of current required the until the date you lifer bankruptcy: ast calendar year: Jury 1 to Jury 1 to Jury 2 to Jury 3 to Jury 3 to Jury 4 to Jury 5 the calendar year Jury 6 the calendar year Jury 7 to Jury 8 the calendar year Jury 9 the calendar year Jury 1 to Jury 1 to Jury 1 to Jury 1 to Jury 1 to Jury 1 to Jury 1 to Jury 1 to Jury 1 to	nat income is taxable. Example in the interest of you have income that you from each source separate section 1 Ources of income excribe below. (but example income excribe below. (but example income excribe below. (but example income excribe excribe income excribe income excribe income excribe excribe income excribe excribe income excribe excribe income excribe	nples of other income are st; dividends; money coll ou received together, list is ly. Do not include income sty. Do not include income style income style income style include include income style include include include income style include inclu	e alimony; child support; Sociected from lawsuits; royalties it only once under Debtor 1. e that you listed in line 4. Debtor 2. Sources of Income Describe below.	Gross income from each source (before deductions a exclusions): \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Include income regardless of whether the and other public benefit payments; pensions winnings. If you are filing a joint case and List each source and the gross income to No Yes. Fill in the details.	nat income is taxable. Example in the interest of you have income that you from each source separate section of the income in th	nples of other income are st; dividends; money coll ou received together, list is ly. Do not include income are sty. Do not include income are style income are	e alimony; child support; Sociected from lawsuits; royalties it only once under Debtor 1. e that you listed in line 4. Debtor 2. Sources of income. Describe below.	Gross Income from each source (before deductions a exclusions) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor	1	
THURST		

Susan D.	Workman		
First Name	Middle Name	Last Name	

Part 3:	List Certain Payments You Made Befo	re You Filed f	or Bankruptcy						
s. Are eith	er Debtor 1's or Debtor 2's debts primarily c	consumer debts	?						
☐ No.	Neither Debtor 1 nor Debtor 2 has primarily "incurred by an individual primarily for a perso	y consumer deb onal, family, or ho	ts. Consumer debts are ousehold purpose."	defined in 11 U.S.C. § 101(8	i) as				
	During the 90 days before you filed for bankru	uptcy, did you pa	y any creditor a total of \$6	3,425* or more?					
	☐ No. Go to line 7.								
	Yes. List below each creditor to whom you the total amount you paid that creditor. Described the child support and alimony. Also, do not be to the child support and alimony.	o not include pa	yments for domestic supp	ort obligations, such as					
	* Subject to adjustment on 4/01/19 and every	3 years after tha	t for cases filed on or afte	er the date of adjustment.					
☑ Yes.	. Debtor 1 or Debtor 2 or both have primarily	v consumer deb	ts.						
	During the 90 days before you filed for bankru			600 or more?					
	☑ No. Go to line 7.								
	Yes. List below each creditor to whom you creditor. Do not include payments for allmony. Also, do not include payments	r domestic suppo	rt obligations, such as ch	ild support and					
		Dates of payment	Total amount paid	Amount you still awe	Was this payment for				
			\$	\$	☐ Mortgage				
	Creditor's Name				☐ Car				
					Credit card				
	Number Street				Loan repayment				
					Suppliers or vendors				
					Other				
	City State ZIP Code	1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m	22.0 e 2000 en 1 fourman de 2000 en 10 d	BASANA PARAMANAN AMAMAN KAMBAN KAMBAN BANGAN PANGAN PANGAN PANGAN BANGAN KAMBAN BANGAN BANGAN BANGAN BANGAN BA	K.				
	100 10 10 10 10 10 10 10 10 10 10 10 10		¢	\$	☐ Mortgage				
	Creditor's Name		Ψ	Ψ	☐ Car				
					☐ Credit card				
	Number Street	*			Loan repayment				
					Suppliers or vendors				
					Other				
	City State ZIP Code				Ciner				
		Managaran arang managan pang pang kalawa ana da aka da aka aka aka aka aka aka aka		ngan Mahababah Sar	urumaanaman muunun muunna muunna enemen koksisisissi kalkaisissi (N. 122 k.) killisti Yennen				
			\$	\$	☐ Mortgage				
	Creditor's Name	,			☐ Car				
					Credit card				
	Number Street				Loan repayment				
					Suppliers or vendors				
					Other				
	City State ZIP Code								

Statement of Financial Affairs for Individuals Filing for Bankruptcy

tor 1	Susan D. W					Case number (if known	1., 1.000
	First Name	Middle Name	Last Name				,
Inside corpo agent such	lers include your rorations of which orations of which ot, including one for as child support	elatives; any g you are an off or a business	general partners ficer, director, pe	; relatives of any g erson in control, or	eneral partners; pa owner of 20% or m	rtnerships of whic lore of their voting	tho was an insider? h you are a general partner; securities; and any managing r domestic support obligations,
ØΝ							
☐ Y	es. List all payme	nts to an insid	der.	.MOMPHYSIAN AC	ti istovicu makonska katerarija	: .ooxte800000000########	C. microstropiskumiskuminiskiniskopponobjectorennimumi. Wien ingeneralennimum
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	insider's Name			***	\$	\$	
Ī	Number Street						
-	City	9	ate ZIP Code				
2020	Children was well as a relief of the 1997 to 2000 and all all all and all and all all all all all all all all all al	Administrative recognition to the confidence of	######################################	p and p a	\$	\$	
ī	Insider's Name				·	-	
_	Number Street			_			
ì	rvanibo, odest						
-							
- Within	City 1 1 year before y		ate ZIP Code ankruptcy, did y	you make any pay	/ments or transfe	any property on	account of a debt that benefited
Within an ins Include	City 1 1 year before y sider? le payments on de	ou filed for b	ankruptcy, did y ed or cosigned b	oy an insider. Dates of	Total amount	Amount you still	account of a debt that benefited Reason for this payment
Within an ins Includ	City 1 1 year before yesider? le payments on de	ou filed for b	ankruptcy, did y ed or cosigned b	oy an insider.		Amount you still	
Withing an instance of the control	City 1 1 year before yesider? le payments on de	ou filed for b	ankruptcy, did y ed or cosigned b	oy an insider. Dates of	Total amount	Amount you still	Reason for this payment
Within an ins Include ☑ Ye	City 1 1 year before yesider? Ile payments on decorates Sees. List all paymer	ou filed for b	ankruptcy, did y ed or cosigned b	oy an insider. Dates of	Total amount	Amount you still- owe	Reason for this payment
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Within an ins Include No Ir	City 1 1 year before yesider? Ite payments on decopes. List all payments on decopes. List all payments on decopes. List all payments on decopes.	ou filed for b	ankruptcy, did y ed or cosigned b	oy an insider. Dates of	Total amount paid	Amount you still- owe \$	Reason for this payment
Within an ins Include No Ye	City n 1 year before yesider? de payments on de poes. List all payments naider's Name Number Street City	ou filed for b	ankruptcy, did y ed or cosigned b	oy an insider. Dates of	Total amount paid	Amount you still- owe \$	Reason for this payment

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1

Susan D. V	Vorkman		Case number (if known)	17-14630
First Name	Middle Name	Last Name		

Within 1 year before you filed for bankrup List all such matters, including personal inju- and contract disputes.						
☐ No ☑ Yes. Fill in the details.	COTTON CONTROL CONTROL	n name (1,555) 19 O myak bu wa piseri ka si O bu sewa asi D kan awa cesa		enele :: ellekkieleke el	19-4868 (64-24-130).	WANTEN IO TOTAL OFFICE OF COLUMN TO THE COLUMN TO
	Nature o	of the case	Court or agency			Status of the case
Bank of NY Mellon Trust Co. v. Case title: Susan D. Workman, et al	Foreclosure; Date filed: 08/04/2014		Lake County Court of Common Pleas Court Name		Pending	
	CONTRACTOR		47 North Park Place Number Street		On appeal Concluded	
Case number 14CF001548			Painesville City	OH State	44077 ZIP Code	
Case title:			Court Name			Pending On appeal
			Number Street			Concluded
Case number			City	State	ZIP Code	
Check all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below.		ny of your property reposs Describe the property	sessea, foreciose	d, garnis	bhed, attached	neer soutournemonnumbi
Check all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below.			sessea, foreciose	d, garnis		Value of the property
Check all that apply and fill in the details be No. Go to line 11.		Describe the property	sessea, foreclose	d, garnis		Value of the propert
Check all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below.		Describe the property Foreclosure Explain what happened		d, garnis		Value of the propert
Check all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below. Creditor's Name		Describe the property Foreclosure Explain what happened Property was reposs	sessed.	d, garnis		Value of the propert
Check all that apply and fill in the details be No. Go to line 11. Yes. Fill in the information below. Creditor's Name		Describe the property Foreclosure Explain what happened	sessed. osed.	d, garnis		Value of the propert
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Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

tor 1	Susan D. Worl		Case number (# known) 17-14630
	First Name N	Middle Name La	Last Name
. Within	1 90 days before	you filed for bankr	ruptcy, did any creditor, including a bank or financial institution, set off any amounts from your
		make a payment be	pecause you owed a debt?
☑ No	o es. Fill in the detail	1-	
☐ Ye	es. Fill in the detail	is.	W. C. Land Manager and C. Land Control of the Contr
			Describe the action the creditor took Date action Amount
_		<u> </u>	was taken and a second as second a
Cre	editor's Name		1 PART 1 Annual Control of the Contr
			s
Nun	mber Street		
City	,	State ZIP Code	Last 4 digits of account number: XXXX-
			•
Within	1 vear before vo	ou filed for bankrup	ptcy, was any of your property in the possession of an assignee for the benefit of
credito	ors, a court-appo	inted receiver, a ci	custodian, or another official?
☑ No			
Yes	S		
rt 5:	List Certain G	ifts and Contrib	outions
Within .	2 years before yo	ou filed for bankrul	uptcy, did you give any gifts with a total value of more than \$600 per person?
		ou nied for bankruļ	uptcy, did you give any gifts with a total value of more than \$600 per person?
✓ No			uptcy, did you give any gifts with a total value of more than \$600 per person?
✓ No			uptcy, did you give any gifts with a total value of more than \$600 per person?
☑ No ☐ Yes ☐GI	s. Fill in the details		
☑ No ☐ Yes ☐GI	s. Fill in the details	s for each gift.	
☑ No ☐ Yes ☐GI	s. Fill in the details	s for each gift.	Describe the gifts Dates you gave Value
☑ No ☐ Yes Gi	s. Fill in the details ifts with a total valu ir person	s for each gift.	Describe the gifts Dates you gave Value
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First Name Middle Name	Case nui	mber (if known) 17-14630
	Last Name	
	ruptcy, did you give any gifts or contributions with a	a total value of more than \$600 to any charity?
✓ No✓ Yes. Fill in the details for each gift or co	ontribution,	
Gifts or contributions to charities		
that total more than \$600	Describe what you contributed	Date you Value contributed
Charity's Name		\$
	Account	
	·	\$
Number Street	——————————————————————————————————————	· ·
City State ZIP Code	_	
t 6: List Certain Losses		
Yes. Fill in the details.	The Carried and Ca	
Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss Value of property lost
	Include the amount that insurance has paid. List pending claims on line 33 of Schedule A/B: Property:	rinsurance .
	A CONTRACTOR OF THE PARTY OF TH	
		\$
		\$
		\$
/ithin 1 year before you filed for bankrup	otcy, did you or anyone else acting on your behalf n	ay or transfer any property to anyone you
Vithin 1 year before you filed for bankrup onsulted about seeking bankruptcy or p	otcy, did you or anyone else acting on your behalf n	
Jithin 1 year before you filed for bankrup onsulted about seeking bankruptcy or proclude any attorneys, bankruptcy petition pr	ntcy, did you or anyone else acting on your behalf p	
Vithin 1 year before you filed for bankrup onsulted about seeking bankruptcy or p nolude any attorneys, bankruptcy petition pr	ntcy, did you or anyone else acting on your behalf preparing a bankruptcy petition? Teparers, or credit counseling agencies for services rec	
Jithin 1 year before you filed for bankrup onsulted about seeking bankruptcy or proclude any attorneys, bankruptcy petition pr	ntcy, did you or anyone else acting on your behalf p	quired in your bankruptcy. Date payment or Amount of payment
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Vithin 1 year before you filed for bankrup onsulted about seeking bankruptcy or plactude any attorneys, bankruptcy petition provided in the details.	ntcy, did you or anyone else acting on your behalf preparing a bankruptcy petition? Teparers, or credit counseling agencies for services rec	quired in your bankruptcy. Date payment or Amount of payment
Vithin 1 year before you filed for bankrup onsulted about seeking bankruptcy or proclude any attorneys, bankruptcy petition proclude. No Yes. Fill in the details. Person Who Was Paid	ntcy, did you or anyone else acting on your behalf preparing a bankruptcy petition? Teparers, or credit counseling agencies for services rec	quired in your bankruptcy. Date payment or Amount of payment
Aithin 1 year before you filed for bankrup onsulted about seeking bankruptcy or proclude any attorneys, bankruptcy petition proclude any attorneys. Dankruptcy petition proclude any attorneys. No Yes. Fill in the details. Person Who Was Paid	ntcy, did you or anyone else acting on your behalf preparing a bankruptcy petition? Teparers, or credit counseling agencies for services rec	quired in your bankruptcy. Date payment or Amount of paymen
Vithin 1 year before you filed for bankrup onsulted about seeking bankruptcy or proclude any attorneys, bankruptcy petition proclude. No Yes. Fill in the details. Person Who Was Paid	ntcy, did you or anyone else acting on your behalf preparing a bankruptcy petition? Teparers, or credit counseling agencies for services rec	quired in your bankruptcy. Date payment or Amount of payment
Within 1 year before you filed for bankrup onsulted about seeking bankruptcy or proclude any attorneys, bankruptcy petition proclude any attorneys, bankru	ntcy, did you or anyone else acting on your behalf preparing a bankruptcy petition? Teparers, or credit counseling agencies for services rec	quired in your bankruptcy. Date payment or Amount of payment
Within 1 year before you filed for bankrup consulted about seeking bankruptcy or principle any attorneys, bankruptcy petition principle. No Yes. Fill in the details. Person Who Was Paid Number Street	ntcy, did you or anyone else acting on your behalf preparing a bankruptcy petition? Teparers, or credit counseling agencies for services rec	quired in your bankruptcy. Date payment or Amount of payment

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Susan D.	Workman		
First Name	Middle Name	Last Name	

Case number (if known)	17-14630

	Description and value of any proper	AND THE RESERVE OF THE PERSON	Date payment or transfer was made	Amount of payment
Person Who Was Paid	-			
Number Street	-			\$
value steet			TO LEAD AND A SALES	\$
	-			
City State ZIP Code	-			
Email or website address				
Person Who Made the Payment, if Not You			II) to the following the control of	
mised to help you deal with your credit not include any payment or transfer that y No Yes. Fill in the details.	ou listed on line 16.			CHANGE VALUE OF
	Description and value of any propert	y transferred	Date payment or transfer was made	Amount of pay
Person Who Was Paid	**************************************			¢
Number Street				Ψ
	-			\$
			•	
City State ZIP Code hin 2 years before you filed for bankrup	otcy, did you sell, trade, or otherwise	e transfer any prop	erty to anyone, other tha	n property
•	business or financial affairs? made as security (such as the granting ve already listed on this statement.	of a security interes	st or mortgage on your pro	perty).
hin 2 years before you filed for bankrup nsferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you ha	business or financial affairs? made as security (such as the granting	of a security interes	st or mortgage on your pro	perty).
hin 2 years before you filed for bankrup nsferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you ha	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interes	st or mortgage on your pro	perty). I Date trans
hin 2 years before you filed for bankrup nsferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you had No Yes. Fill in the details.	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interes	st or mortgage on your pro	perty). I Date trans
hin 2 years before you filed for bankrup nsferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you ha No Yes. Fill in the details. Person Who Received Transfer	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interes	st or mortgage on your pro	perty). I Date trans
hin 2 years before you filed for bankrup nsferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you ha No Yes. Fill in the details. Person Who Received Transfer	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interes	st or mortgage on your pro	perty). I Date trans
hin 2 years before you filed for bankrup nsferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you ha No Yes. Fill in the details. Person Who Received Transfer	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interes	st or mortgage on your pro	perty). I Date trans
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hin 2 years before you filed for bankrup nsferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you ha No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interes	st or mortgage on your pro	perty). I Date trans
hin 2 years before you filed for bankrup nsferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you ha No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	business or financial affairs? made as security (such as the granting ve already listed on this statement. Description and value of property	of a security interes	st or mortgage on your pro	perty). I Date trans
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Debtor 1	Susan D, \	Vorkman		47 () one
	First Name	Middle Name	Last Name	Case number (#known) 17-14630
19. With	in 10 vears bef	ore you filed for	hankminton allalare (
are	a beneficiary?	These are often.	called asset-protection device	fer any property to a self-settled trust or similar device of which you
	•	Theore are often	called asset-protection device	7 0 8.)
<u> </u>				
∟i ′	Yes. Fill in the de	etails.		
			William Committee Committe	00000004440000000446-0-09-00046-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0
			Description and v	afue of the property transferred.
				Date transfer was made
				The state of the s
N	lame of trust			
			The second secon	
Part 8:	List Cortain			
المسورة وسوا	List Certain	Financial Ac	counts, Instruments, S	Safe Deposit Boxes, and Storage Units
20. Withi	n 1 year before	you filed for bar	nkruptov, were any financi	ial accounts or instruments held in your name, or for your benefit,
close	d, sold, moved	, or transferred?)	ar accounts or instruments held in your name, or for your benefit,
Inclu	de checking, sa	ıvings, money m	arket, or other financial a	ccounts; certificates of deposit; shares in banks, credit unions,
broke	erage houses, p	ension funds, c	Ooperatives, associations	, and other financial institutions.
₩ N	0	, -	autoo, associations,	, and other mancial institutions.
	es. Fill in the de	talla		
	sati ili ili the de	italis.		Apple agents and a second and a
			Last 4 digits of acc	ount number Type of account or Date account was fast palance before
			1 Carlo Carl	Last Dalance before
				instrument closed, sold, moved, closing or transfer or transfer
N	lame of Financial In:	etitutlon		The state of the s
	The state of the s	strict(O)?	XXXX-	Checking
N.	umber Street		 -	——————————————————————————————————————
N	umber Street			L Savings □
_				Money market
				Brokerage
C	lty	State ZIP Co	de	
	The second desiration of the second section	Bank voice mp1000000, voice on 100 1000 allumbre mp1000 (debancous	Marier of members of the relationship for appearance that have a presentable and the presentable that it is a present of the p	LOther PRESENTED TO THE PROPERTY OF THE PROPE
Na	ame of Financial Ins	fitution	XXXX- <u></u>	\$
N.	ımber Street			
NC	imber Street			Money market
_				Brokerage
				Other_
Cit	у	State ZIP Cor	de de	Other
. Do you	now nave, or o	lid you have with	nin 1 year before you filed	for bankruptcy, any safe deposit box or other depository for
	ies, cash, or ot	her valuables?		- The state of the
∠ No				
Yes	. Fill in the deta	ils.		
			Who else had access	
				united the state of the state o
				have it?
				□ No
Nan	ne of Financial Insti	lution	Name	Yes
_				L 163
Nun	nber Street		Number Street	
			Hamber Street	
Otto				ZIP Code
City		State ZIP Code	•	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

			Case number (if known) 17-14630	
	First Name Middle Name L	ast Name		
2 Have	Voli stored property in a storage uni	f or place atherstices are to		
V N	lo	t or place other than your home within 1	year before you filed for bankruptcy?	
Q Y	es. Fill in the details.			
		Who else has or had access to it?	Describe the contents	Do you still
			inio <mark>describitationes de la constant</mark>	have it?
				□No
	Name of Storage Facility	Name	7-	Yes
	Number Street	Number Street		
		Namber Officer		1100
		City State ZIP Code		
	City State ZIP Code			
110000000000000000000000000000000000000				
art 9:	Identify Property You Hold	or Control for Someone Else		
3. Do v				
or he	old in trust for someone.	someone else owns? include any propert	y you borrowed from, are storing for,	
V				
□ Y	es. Fill in the details.			
		Where is the property?	Describe the property	Value
			A Margaret Committee of the Committee of	
	Owner's Name			•
		Number Street		Ψ
	Number Street	Marinoet Otteet		
,				The state of the s
	City State ZIP Code	City State ZIP Code		
	City State ZIP Code			
				The state of the s
art 10	: Give Details About Environ	mental Information		
art 10 or the p <i>Envir</i>	Give Details About Environ purpose of Part 10, the following defi conmental law means any federal, sta	mental Information nitions apply: te, or local statute or regulation concern	ing pollution, contamination, releases	on one one
art 10 or the p <i>Envir</i> hazar	Give Details About Environ ourpose of Part 10, the following deficient on mental law means any federal, stated ous or toxic substances, wastes, o	mental Information nitions apply: te, or local statute or regulation concerni r material into the air, land, soil, surface	water, groundwater, or other modium	of f
art 10 or the p <i>Envir</i> hazar includ	Give Details About Environ purpose of Part 10, the following defi conmental law means any federal, sta dous or toxic substances, wastes, o ding statutes or regulations controlli	mental Information nitions apply: te, or local statute or regulation concerni r material into the air, land, soil, surface on ng the cleanup of these substances, was	water, groundwater, or other medium, tes, or material.	
art 10 or the p Envir hazar includ	Give Details About Environ purpose of Part 10, the following deficient on mental law means any federal, standous or toxic substances, wastes, oding statutes or regulations controllineans any location, facility, or prope	mental Information nitions apply: te, or local statute or regulation concerni r material into the air, land, soil, surface of ng the cleanup of these substances, was ty as defined under any environmental la	water, groundwater, or other medium, tes, or material.	
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art 10 or the p Envir hazar inclue Site n it or u Hazar subst eport al	courpose of Part 10, the following defi- conmental law means any federal, statedous or toxic substances, wastes, or ding statutes or regulations controlling eans any location, facility, or proper used to own, operate, or utilize it, increased to own, operate, or utilize it, increased, hazardous material, pollutant, ill notices, releases, and proceedings my governmental unit notified you that it.	mental Information nitions apply: te, or local statute or regulation concerni r material into the air, land, soil, surface on ng the cleanup of these substances, was rty as defined under any environmental la luding disposal sites. vironmental law defines as a hazardous contaminant, or similar term. that you know about, regardless of when at you may be liable or potentially liable u	water, groundwater, or other medium, tes, or material. www. whether you now own, operate, or uwaste, hazardous substance, toxic they occurred. nder or in violation of an environmenta	tilize
art 10 or the p Envir hazar inclue Site n it or u Hazar subst eport al	courpose of Part 10, the following defi- conmental law means any federal, statedous or toxic substances, wastes, or ding statutes or regulations controlling eans any location, facility, or proper used to own, operate, or utilize it, increased to own, operate, or utilize it, increased, hazardous material, pollutant, ill notices, releases, and proceedings my governmental unit notified you that it.	mental Information nitions apply: te, or local statute or regulation concerni r material into the air, land, soil, surface on ng the cleanup of these substances, was rty as defined under any environmental la luding disposal sites. vironmental law defines as a hazardous contaminant, or similar term. that you know about, regardless of where the tyou may be liable or potentially liable u Governmental unit Envir	water, groundwater, or other medium, tes, or material. www. whether you now own, operate, or uwaste, hazardous substance, toxic they occurred. nder or in violation of an environmenta	tilize
art 10 or the p Envir hazar inclue Site n it or u Hazar subst eport al	Give Details About Environ curpose of Part 10, the following defi- conmental law means any federal, sta- dous or toxic substances, wastes, o- ding statutes or regulations controlli- means any location, facility, or proper ised to own, operate, or utilize it, inc- rdous material means anything an en- ance, hazardous material, pollutant, ill notices, releases, and proceedings my governmental unit notified you that is. Fill in the details.	mental Information nitions apply: te, or local statute or regulation concerni r material into the air, land, soil, surface of ing the cleanup of these substances, was rty as defined under any environmental la luding disposal sites. vironmental law defines as a hazardous contaminant, or similar term. that you know about, regardless of where the tyou may be liable or potentially liable u Governmental unit Envir	water, groundwater, or other medium, tes, or material. www. whether you now own, operate, or uwaste, hazardous substance, toxic they occurred. nder or in violation of an environmenta	tilize

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Susan D. Worki	man	47.44000	
First Name Mid	idle Name Last Name	Case number (#known) 17-14630	<u> </u>
25. Have you notified any or	Wernmontal unit of annual		
다가	overnmental unit of any release of hazard	ious material?	
☑ No			
Yes. Fill in the detail	S.	ANCO 1112 DE ANTONIO	
	Governmental unit	Environmental law, if you know it	Date of notice
		を表する。 ・	New Control of the Co
Name of site	Committee		
	Governmental unit		
Number Street	Number Street		Advances of the State of the St
	City State	ZIP Code	
City		Sil Odd	
City	State ZIP Code		
6. Have you been a party in	any judicial or administrative	The second of th	aan ee is 7 EE Januari allees Makaasaa ee ee QABaasa ee ee ee ge EAb an ee ee William Eawa ee ee go Ee baan aa
☑ No	any jaunolation administrative proceeding	g under any environmental law? Include settleme	ents and orders.
Yes. Fill in the details.			
— Tes: Fin in the details.	·	TENENT TO THE PROPERTY OF THE	
	Court or agency	Nature of the case	Status of the
Case title	- 10-10-10-10-10-10-10-10-10-10-10-10-10-1		case
	Court Name		Пъ
	- Tallie		L Pending
	Number Street		On appeal
	olice.		Concluded
Case number	City St		
	St St	ate ZIP Code	
art 11: Give Details A	hout Your Business or Comment		
	About Your Business or Connection	s to Any Business	
A sole proprietor of	filed for bankruptcy, did you own a busin	ness or have any of the following connections to	any business?
	. The displace is a state. Droigssion or	' Other activity, either full 4:	
A partner in a partn	ted liability company (LLC) or limited liab	ility partnership (LLP)	
	or managing executive of a corporation		
An owner of at least	t 5% of the vertice and the corporation		
	t 5% of the voting or equity securities of	a corporation	
No. None of the above a	applies. Go to Part 12.		
☐ Yes. Check all that appl	ly above and fill in the details below for e	ach business.	
	Describe the nature of the	ne business Employer Identificatio	A number
Business Name	The state of the s		Security number or ITIN.
		**	
Number Street		EIN:	
	The Control of the Co	Dates business existe	
	Name of accountant or be		
	and of the little and	From	То
City Sta	ate ZIP Code		10
	Describe the nature of the	e business Employer Identification	
Business Name	250 C		Security number or ITIN.
	Violence m.	general new state of the second of the secon	THE PARTY OF THE P
Number Street		EIN:	
	T 8000	Dates business existed	
	Name of accountant or bo		
	same unaccomization bo		
City Stat	te ZIP Code	From	То
A STATE OF THE PROPERTY OF THE	A STATE OF THE STA	¥	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1	Susan D. W	/orkman		
	First Name	Middle Name	ast Name Case num	ber (if known) 17-14630
	2004			
		Annual (1997) Annual Annual (1997) Annual (1	Describe the nature of the business	
			Of the Dusiness	Employer Identification number
	Business Name			Do not include Social Security number or ITIN.
				EIN:
	Number Street			
				Dates business existed
			The second secon	
	City	State ZIP Code	Name of accountant or bookkeeper	From To
annen mingol (annuero), migolikus vez				
28. With	in 2 years before	You filed for hanken	ntov did	
instit	tutions, creditors	S. Or Other parties	ptcy, did you give a financial statement to anyone a	bout your business? Include all financial
		-, mor parties.		
	lo Son Ellimater de			
، نیا	es. Fill in the det	tails below.	W	
			Date Issued	
			等是在企业的企业的企业的企业的。1915年在1916年在1916年的企业的企业的企业的企业的企业的企业的企业的企业的企业的企业的企业的企业的企业的	
	Name		MM / DD / YYYY	
_				
ń	Number Street			
_				
ō	ity			
		State ZIP Code		
	_			
art 12:	Sign Below			
	Sign Below			
l have	read the answe	ers on this Statement		
answ	ers are true and	correct. I understand	of Financial Affairs and any attachments, and I dec	lare under penalty of perjury that the
111 001	iiiecuwii wiin a r	Yankriintev eaga ass	of Financial Affairs and any attachments, and I dec I that making a false statement, concealing propert result in fines up to \$250,000, or imprisonment for t	y, or obtaining money or property by fraud
10 0.0	3.0 99 152, 134/1	, 1519, and 3571.	, and a superior in the last	up to 20 years, or both.
_ /	1. 1	Λ , ℓ	(
X Is	Susan D. Workn		*	
/	nature of Debtor 1			
			Signature of Debtor 2	
Dat	e <u>08/16/20</u> 17			
			Date	
Did yo	u attach additior	nal pages to Your Sta	tement of Financial Affairs for Individuals Filing for	Bankruptcv (Official Form 187\2
☑ No)		_	The state of the s
☐ Ye	es			
Did vo	I nav or agree to			
☑ No	- puy or agree to	pay someone who is	s not an attorney to help you fill out bankruptcy forn	ns?
_ 100	. Manue of beison		Attach th	ne Bankruptcy Petition Preparer's Notice,
			Declar	ration, and Signature (Official Form 119).
		994 mm + 1,000 mm + 0,000 mm + 0,		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in this in	formation to id	entify your case:		
Debtor 1	Susan D. W	orkman	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middje Name	Last Name	
United States E	Bankruptcy Court fo	or the: Northern District of Ohio		
Case number (If known)	17-14630		<u> </u>	

Check as directed in lines 17 and 21:
According to the calculations required by this Statement:
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
3. The commitment period is 3 years.4. The commitment period is 5 years.
Check if this is an amended filing

Column B

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1:	0-11-4			
rait i:	Calculate	Your Average	Monthly	Income

- 1. What is your marital and filing status? Check one only.
 - Not married, Fill out Column A, lines 2-11.
 - ☐ Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

		Debtor 1	Debtor 2 or non-filing spouse
WARRING TO THE REAL PROPERTY.	 Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 	\$ <u>2,200.48</u>	\$ <u>0.</u> 00
	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ <u>0.0</u> 0	\$0.00
4	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ 702.00	\$0.00
5	Net income from operating a business, profession, or Debtor 1 Debtor 2		
	Gross receipts (before all deductions) \$0.00 \$0.00		
	Ordinary and necessary operating expenses -\$0.00 - \$0.00		
	the state of the s	Copy here→ \$ <u>0.00</u>	\$ <u>0.00</u>
6.	Net income from rental and other real property Debtor 1 Debtor 2		
	Gross receipts (before all deductions) \$0.00 \$0.00		
	Ordinary and necessary operating expenses -\$\(\frac{50.00}{}\) - \$\(\frac{50.00}{}\)		
iliotoxen	The state of the s	Copy here→ \$ <u>0.00</u>	\$0.00

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

	Debtor 1	Susan D. Workman First Name Middle Name	Last Name	Case number (if known)	17-14630	
				Column A Debtor 1	Golumn B Debtor 2 or non-filing spous	
7.	. Interest, o	lividends, and royalties		\$ <u>0.00</u>	\$ <u>0.00</u>	
8.	. Unemploy	ment compensation		\$ <u>0.00</u>	\$0.00	_
	Do not ent the Social	er the amount if you contend tha Security Act. Instead, list it here:	t the amount received was a benefit under	·		
	For you		\$			
	For you	r spouse	 \$			
9.	Pension o	r retirement income. Do not inc der the Social Security Act.	lude any amount received that was a	\$_0.00	\$_0.00	
10	Do not incl received a	ude any benefits received under s a victim of a war crime, a crime errorism. If necessary, list other s	above. Specify the source and amount, the Social Security Act or payments against humanity, or international or ources on a separate page and put the			
	10a			\$ <u>0.00</u>	\$ 0.00	
	10b.			\$ 0.00	\$ 0.00	-
		amounts from separate pages, i	-	+ \$ 0.00		-
				+ \$ <u>0.00</u>	+ \$ <u>0.00</u>	
11.	Calculate column. Th	your total average monthly inc en add the total for Column A to	ome. Add lines 2 through 10 for each the total for Column B.	\$ 2,902.47	\$0.00	= _{\$2,902.47}
						Total average monthly income
16	irt 2: D	etermine How to Measure	Your Deductions from Income			
12.	Copy your	total average monthly income	from line 11			\$ 2,902.47
13.	Calculate t	he marital adjustment. Check o	ne:			φ <u>-,-,-,</u>
	You are	not married. Fill in 0 in line 13d.				
	☐ You are	married and your spouse is filing	with you. Fill in 0 in line 13d.			
	You are	married and your spouse is not t	iling with you,			
	or your	e amount of the income listed in dependents, such as payment of pendents,	line 11, Column B, that was NOT regularly the spouse's tax liability or the spouse's s	paid for the household of paid for the support of someone othe	expenses of you r than you or	
	In lines necessa	13a-c, specify the basis for exclu try, list additional adjustments on	ding this income and the amount of incom a separate page.	e devoted to each purpo	se. If	
	If this ac	ljustment does not apply, enter 0	on line 13d,			
	13a			c		
				\$		
	13c			+ \$		
				1 .0.00	Copy here. 🗲 13d.	0.00
4.	Your currer	nt monthly income. Subtract line			14.	\$ <u>2,902.47</u>
5. C	Calculate yo	ur current monthly income for	the year. Follow these steps:	Sitro-ornidarram representativa de productivo hacerom representativo de la ciencia de conscienta medicando de pode de deservo	Security or the transfer of the contract of th	
1	15a. Copy line	e 14 here 👈			45-	\$2,902.47
		line 15a by 12 (the number of m			15a.	
			,		t.	x 12
1	l5b. The resu	It is your current monthly income	for the year for this part of the form.		15b.	s 34.829.64

Official Form 122C-1

Debtor 1	Susan D.	Workman Middle Name			Ca	ase number (if known)_17	-14630	
1	rustivalina	мійше қате	Last Name			The state of the s	. 1000	
16. Calcu	ılate the median	ı family income that	applies to you.	Follow these s	tone:			
į.	Fill in the state in			OH	сера.			
16b.	Fill in the number	of people in your ho	- Jachald	2				
No.		or people in your no	usenoid.					
i i	io mia a naco, ap	family income for yo oplicable median inco is form. This list may	me amounts ao a	anline usina th	ے : اے جائے مصمم عامل م	the separate	16c,	\$ <u>57,938.00</u>
17. How d	o the lines com	pare?						
17a.	17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3), Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C–2).						rmined under	
17b. 🖵	17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.							
Part 3;	Calculate	Your Commitmer	nt Period Unde	r 11 U.S.C.	§1325(b)(4)			
19 Con								
3								\$ <u>2,90</u> 2.47
income	, copy the amour	nt from line 13d.	1 11 0.5.0. 9 132	ed, your spous 5(b)(4) allows	e is not filing with you to deduct part	you, and you contend t of your spouse's	d	
If the m	arital adjustment	t does not apply, fill in	0 on line 19a.				19a.	- \$ <u>0.00</u>
Subtra	ct line 19a from	line 18.					19b.	\$_2,902.47
20. Calcula	nte your current	monthly income fo	r the vear. Follow	these stens:			130.	
				·				
							20a.	\$ <u>2,902.47</u>
		number of months in						x 12
20b. The result is your current monthly income for the year for this part of the form.								
20c. Cop	y the median far	nily income for your s	state and size of h	ousehold from	iline 16c		, [the transmission of the second contract of th
20c. Copy the median family income for your state and size of household from line 16c.								
	the lines compa							
						of this form, check bo		nitment period is
chec	k box 4, <i>The con</i>	i or equal to line 20c. nmitment period is 5	Unless otherwise <i>year</i> s. Go to Part	ordered by th	e court, on the top	of page 1 of this for	rm,	
Part 4:	Sign Below		(KATATATATATATATATATATATATATATATATATATAT	SITE STANKEN HORSEN STANKEN HER STANKEN HER HER STANKEN STANKE	**************************************	of elder attributed imagings on contributed interlanguage groups and contribution imagings are secured in the contribution of	Andrewsprace (1) in Collection A. Sellinomeroper and contain the Andrewsprace (1) in Collection According to the C	terretainen alla deputation (CCC CCC CCCC CCCC CCCC CCCC CCCC CCC
By sig	ning høre, under	penalty of persury I d	eclare that the inf	ormation on the	e statement and	in according to the	<u> </u>	-
A	Lsusan D. W		- orange entere enterent	y 10 nomanio	iis statement and i	in any attachments is	s true and corre	∍ct,
/ sig	nature of Debtor 1			٠ .	Signature of Debtor 2	2		
De	08/16/2017							
Da	te MM / DD / YY	YY		[DateMM / DD/ Y	YYY		
lf vou r	checked 17a do	NOT fill out or file Fo	rm 1990 0					
				rm On Un - CO	of these to			
ACCOMMON MACHINES AND STREET AND		Z dill	ame it with this fol	iiii. On line 39	of that form, copy	your current monthly	y income from	line 14 above.

Official Form 122C-1

17-14630

AT&T ATTN: BANKRUPTCY FARMER'S BRANCH, TX 75234

AFNI PO BOX 3097 BLOOMINGTON, IL 61702

COUNTRYWIDE HOME LOANS 4500 PARK GRANADA CALABASAS, CA 91302

FFCC CLVLAND 24700 CHAGRIN BLVD SUITE 205 CLEVELAND, OH 44122

GRACERECOVRY 8346 TYLER BV SUITE C MENTOR, OH 44060

I C SYSTEM PO BOX 64378 SAINT PAUL, MN 55164

INTERNAL REVENUE SERVICE 1240 E. 9TH ST. RM. 493 ATTN: INSOLVENCY DEPT. CLEVELAND, OH 44199

JERRY CARR 4443 WEST 56TH ST. CLEVELAND, OH 44144

LAKE HEALTH 7590 AUBURN RD PAINESVILLE, OH 44077

MCGLINCHEY STAFFORD 25550 CHAGRIN BLVD. STE. 406 BEACHWOOD, OH 44022

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS 1901 EAST VOORHEES STREET SUITE C DANVILLE, IL 61834 17-14630

OCWEN LOAN 12650 INGENUITY DR ORLANDO, FL 32826

OHIO DEPARTMENT OF TAXATION ATTN: BANKRUPTCY DIVISION PO BOX 530 COLUMBUS, OH 43216-0000

REALTIME RESOLUTIONS 1750 REGAL ROW STE 120 DALLAS, TX 75235

SHELLPOINT MORTGAGE SERVICING PO BOX 10826 GREENVILLE, SC 29603

TREASURER OF LAKE COUNTY PO BOX 490 PAINESVILLE, OH 44077

UNIVERSITY HOSPITALS 11100 EUCLID AVE CLEVELAND, OH 44106-0000

WILLOW RUN VETERINARY CLINIC 30125 EUCLID AVE. WICKLIFFE, OH 44092

United States Bankruptcy Court

Northern	District of Ohio
In re Susan D. Workman	
	Case No. 17-14630
Debtor Susan Workman	Chapter_13
DISCLOSURE OF COMPENSAT	ION OF ATTORNEY FOR DEBTOR
above named debtor(s) and that compensation p	P. 2016(b), I certify that I am the attorney for the aid to me within one year before the filing of the ne, for services rendered or to be rendered on behalf of on with the bankruptcy case is as follows:
For legal services, I have agreed to accept	\$ 2,150,00
Prior to the filing of this statement I have receive	ed
Balance Due	\$_0.00
2. The source of the compensation paid to me was:	
Debtor Other (specify	·)
3. The source of compensation to be paid to me is:	
Debtor Other (specify)
4. I have not agreed to share the above-disclos are members and associates of my law firm.	ed compensation with any other person unless they
I have agreed to share the above-disclosed care not members or associates of my law firm. A copy of the people sharing the compensation is attached.	ompensation with a other person or persons who of the Agreement, together with a list of the names
5. In return of the above-disclosed fee, I have agreed bankruptcy case, including:	to render legal service for all aspects of the
a. Analysis of the debtor's financial situation, and whether to file a petition in bankruptcy;b. Preparation and filing of any petition, schedule required;	s, statements of affairs and plan which may be
c. Representation of the debtor at the meeting of c adjourned hearings thereof;	reditors and confirmation hearing, and any

d. [Other provisions as needed]
All customary pre-petition and pre-confirmation services as detailed in LBR 2016-1(A)(2); Debtor's Counsel is opting out of the no look fee pursuant to LBR 2016-1(C) and will file the detailed Initial Application for Compensation within sixty (60) days of confirmation

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: All customary post-confirmation services as detailed in LBR 2016-1(A)(2) including those outlined in LBR 2016-1(A)(2)(vii) - (xvi); representation of the debtors in any dischargeability actions, and any proceeding objecting to the Debtors discharge, evidentiary hearings on relief from stay motions or any other adversary proceeding.

Any applications for compensation for these services will be made pursuant to LBR 2016.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

08/16/2017

B2030 (Form 2030) (12/15)

/s/ Whitney Kaster, 0091540

Date

Signature of Attorney

The Dann Law Firm

Name of law firm PO Box 6031040 Cleveland, OH 44103 216-373-0539 wkaster@dannlaw.com